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THE

MEDICAL ANNUAL,

OR,

BRITISH MEDICAL ALMANACK.

1839.

EDITED BY WILLIAM FARR.

To be Continued Annually.

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INTRODUCTION.

The Medical Annual has this year undergone some alterations, which, we believe, will increase its utility. The *Day of the Year* which is given in the Calendar, affords a ready means of determining the duration of cases of disease, when the date of the attack and termination are known.

Mr. Clarke collected and corrected the Statistics of the English Medical Institutions. The information has been readily obtained in the majority of cases; in others, applications have been neglected, or obstacles thrown in the way. As the utility of this kind of information is universally acknowledged, the Medical Officers will, we hope, take the trouble to render the accounts of the Institutions to which they belong accurate. Mr. Rowland Hill's admirable plan of postage would greatly facilitate the transmission of information from the Members of the Profession in the country.

This Annual contains an Article by the Rev. Charles Oxenden, who has contributed more than any other person to the improvement of the County Hospitals. When the Directors were conducting these isolated charities in entire ignorance of each other's proceedings, Mr. Oxenden compiled, at great labour and expense, a Statistical View of their economy; and forwarded copies to the Officers and Directors. It was the first step to improved regulations. In the whole kingdom, St. Thomas's, Guy's, St. Bartholomew's, and Bethlem, are now the only Hospitals which publish no Report. The friends of the sick poor fear that the wealthy treasurers of these Institutions have good reasons for withholding from the public an account of their stewardships. Is it because the voice of the sick poor is feeble, that their cries are not heard in the House of Commons?

During the past year, an Inquiry into the Medical Relief of Paupers was brought to a satisfactory issue before a Committee of the House of Commons. Through the exertions of the *British Medical Association*, and a Committee appointed by the *Provincial Medical and Surgical Association*, much valuable evidence was adduced. And, on the motion of Mr. Wakley, the House of Commons was pleased to order an extensive series of Statistical Returns; which established the great extent of the services performed by the Union Surgeons, and the entire inadequacy of their salaries. At the present rate of remuneration, the Medical Officers cannot even supply the poor with efficient remedies. The Committee, of which Mr. Fazakerly was chairman, conducted the inquiry to the satisfaction of all parties, and reported favourably; a result which must be principally ascribed to the judicious manner in which Mr. Wakley, the friend and advocate of the Profession, conducted the cause.

The Act for the Registration of Births, Marriages, and Deaths, has been some time in operation; and at the Central Office, statistical facts of great importance to Medical science are every day accumulating. The age, cause of death, and other facts are recorded; the collation of which will determine the influence of age, sex, locality, season, and occupation, upon the life of the nation; and, by discovering the cause of diseases, lead to their prevention and extirpation. The mortality of the United Kingdom has declined; devastating plagues no longer cloud the atmosphere; but death still knocks at every door in some garb, and tears our best friends away from our hearts and household hearths, in the vigour and fresh blossom of life. If the secret roots of death were once pointed out by authentic observation, the human frame may be prolonged to its full ripeness, until it fell as gently as a plant upon the earth.

It will depend entirely upon the members of the Medical Profession. whether the attempt made by the Legislature to promote Medical Science shall be successful—whether a collection of facts by *civil practitioners* as valuable as the returns made by the surgaons of the army, shall be recorded and published. That this may be accomplished, the Medical attendant of the patient must give a certificate of the cause of death *in writing*. He must not trust *the fact* to the memory of a nurse, or to the vigilance of the distressed relatives.

The Registrar-General, T. H. Lister, Esq., and the Government, are anxious to render the Registration serviceable to Medical Science; the Medical Profession will, we confidently hope, on their part, zealously contribute to the success of the Act, and the accuracy of the registered observations.

We have given an Abstract of a Report from the Medical Committee of the *University of London*. The names of Sir James Clark, Dr. Arnott, and other enlightened Members of the Senate, induce us to hope that this Metropolitan Institution will be placed on a liberal, and therefore a secure basis.

JANUARY.			FEBRUARY.			MARCH.			APRIL.		
Day of Month.	Day of Week.	Day of Year.	Day of Month.	Day of Week.	Day of Year.	Day of Month.	Day of Week.	Day of Year.	Day of Month.	Day of Week.	Day of Year.
1	Tu.	1	1	Fr.	32	1	Fr.	60	1	M.	91
2	W.	2	2	Sa.	33	2	Sa.	61	2	Tu.	92
3	Th.	3	3	𝔖	34	3	𝔖	62	3	W.	93
4	Fr.	4	4	M.	35	4	M.	63	4	Th.	94
5	Sa.	5	5	Tu.	36	5	Tu.	64	5	Fr.	95
6	𝔖	6	6	W.	37	6	W.	65	6	Sa.	96
7	M.	7	7	Th.	38	7	Th.	66	7	𝔖	97
8	Tu.	8	8	Fr.	39	8	Fr.	67	8	M.	98
9	W.	9	9	Sa.	40	9	Sa.	68	9	Tu.	99
10	Th.	10	10	𝔖	41	10	𝔖	69	10	W.	100
11	Fr.	11	11	M.	42	11	M.	70	11	Th.	101
12	Sa.	12	12	Tu.	43	12	Tu.	71	12	Fr.	102
13	𝔖	13	13	W.	44	13	W.	72	13	Sa.	103
14	M.	14	14	Th.	45	14	Th.	73	14	𝔖	104
15	Tu.	15	15	Fr.	46	15	Fr.	74	15	M.	105
16	W.	16	16	Sa.	47	16	Sa.	75	16	Tu.	106
17	Th.	17	17	𝔖	48	17	𝔖	76	17	W.	107
18	Fr.	18	18	M.	49	18	M.	77	18	Th.	108
19	Sa.	19	19	Tu.	50	19	Tu.	78	19	Fr.	109
20	𝔖	20	20	W.	51	20	W.	79	20	Sa.	110
21	M.	21	21	Th.	52	21	Th.	80	21	𝔖	111
22	Tu.	22	22	Fr.	53	22	Fr.	81	22	M.	112
23	W.	23	23	Sa.	54	23	Sa.	82	23	Tu.	113
24	Th.	24	24	𝔖	55	24	𝔖	83	24	W.	114
25	Fr.	25	25	M.	56	25	M.	84	25	Th.	115
26	Sa.	26	26	Tu.	57	26	Tu.	85	26	Fr.	116
27	𝔖	27	27	W.	58	27	W.	86	27	Sa.	117
28	M.	28	28	Th.	59	28	Th.	87	28	𝔖	118
29	Tu.	29				29	Fr.	88	29	M.	119
30	W.	30				30	Sa.	89	30	Tu.	120
31	Th.	31				31	𝔖	90			

MAY.			JUNE.			JULY.			AUGUST.		
Day of Month.	Day of Week.	Day of Year.	Day of Month.	Day of Week.	Day of Year.	Day of Month.	Day of Week.	Day of Year.	Day of Month.	Day of Week.	Day of Year.
1	W.	121	1	Sa.	152	1	M.	182	1	Th.	213
2	Th.	122	2	–	153	2	Tu.	183	2	Fr.	214
3	Fr.	123	3	M.	154	3	W.	184	3	Sa.	215
4	Sa.	124	4	Tu.	155	4	Th.	185	4	𝕾	216
5	𝕾	125	5	W.	156	5	Fr.	186	5	M.	217
6	M.	126	6	Th.	157	6	Sa.	187	6	Tu.	218
7	Tu.	127	7	Fr.	158	7	𝕾	188	7	W.	219
8	W.	128	8	Sa.	159	8	M.	189	8	Th.	220
9	Th.	129	9	𝕾	160	9	Tu.	190	9	Fr.	221
10	Fr.	130	10	M.	161	10	W.	191	10	Sa.	222
11	Sa.	131	11	Tu.	162	11	Th.	192	11	𝕾	223
12	𝕾	132	12	W.	163	12	Fr.	193	12	M.	224
13	M.	133	13	Th.	164	13	Sa.	194	13	Tu.	225
14	Tu.	134	14	Fr.	165	14	𝕾	195	14	W.	226
15	W.	135	15	Sa.	166	15	M.	196	15	Th.	227
16	Th.	136	16	𝕾	167	16	Tu.	197	16	Fr.	228
17	Fr.	137	17	M.	168	17	W.	198	17	Sa.	229
18	Sa.	138	18	Tu.	169	18	Th.	199	18	𝕾	230
19	𝕾	139	19	W.	170	19	Fr.	200	19	M.	231
20	M.	140	20	Th.	171	20	Sa.	201	20	Tu.	232
21	Tu.	141	21	Fr.	172	21	𝕾	202	21	W.	233
22	W.	142	22	Sa.	173	22	M.	203	22	Th.	234
23	Th.	143	23	𝕾	174	23	Tu.	204	23	Fr.	235
24	Fr.	144	24	M.	175	24	W.	205	24	Sa.	236
25	Sa.	145	25	Tu.	176	25	Th.	206	25	𝕾	237
26	𝕾	146	26	W.	177	26	Fr.	207	26	M.	238
27	M.	147	27	Th.	178	27	Sa.	208	27	Tu.	239
28	Tu.	148	28	Fr.	179	28	𝕾	209	28	W.	240
29	W.	149	29	Sa.	180	29	M.	210	29	Th.	241
30	Th.	150	30	𝕾	181	30	Tu.	211	30	Fr.	242
31	Fr	151				31	W.	212	31	Sa.	243

SEPTEMBER.			OCTOBER.			NOVEMBER.			DECEMBER.		
Day of Month.	Day of Week.	Day of Year.	Day of Month.	Day of Week.	Day of Year.	Day of Month.	Day of Week.	Day of Year.	Day of Month.	Day of Week.	Day of Year.
1	𝔖.	244	1	Tu.	274	1	Fr.	305	1	𝔖.	335
2	M.	245	2	W.	275	2	Sa.	306	2	M.	336
3	Tu.	246	3	Th.	276	3	𝔖.	307	3	Tu.	337
4	W.	247	4	Fr.	277	4	M.	308	4	W.	338
5	Th.	248	5	Sa.	278	5	Tu.	309	5	Th.	339
6	Fr.	249	6	𝔖.	279	6	W.	310	6	Fr.	340
7	Sa.	250	7	M.	280	7	Th.	311	7	Sa.	341
8	𝔖.	251	8	Tu.	281	9	Fr.	312	8	𝔖.	342
9	M.	252	9	W.	282	8	Sa.	313	9	M.	343
10	Tu.	253	10	Th.	283	10	𝔖.	314	10	Tu.	344
11	W.	254	11	Fr.	284	11	M.	315	11	W.	345
12	Th.	255	12	Sa.	285	12	Tu.	316	12	Th.	346
13	Fr.	256	13	𝔖.	286	13	W.	317	13	Fr.	347
14	Sa.	257	14	M.	287	14	Th.	318	14	Sa.	348
15	𝔖.	258	15	Tu.	288	15	Fr.	319	15	𝔖.	349
16	M.	259	16	W.	289	16	Sa.	320	16	M.	350
17	Tu.	260	17	Th.	290	17	𝔖.	321	17	Tu.	351
18	W.	261	18	Fr.	291	18	M.	322	18	W.	352
19	Th.	262	19	Sa.	292	19	Tu.	323	19	Th.	353
20	Fr.	263	20	𝔖.	293	20	W.	324	20	Fr.	354
21	Sa.	264	21	M.	294	21	Th.	325	21	Sa.	355
22	𝔖.	265	22	Tu.	295	22	Fr.	326	22	𝔖.	356
23	M.	266	23	W.	296	23	Sa.	327	23	M.	357
24	Tu.	267	24	Th.	297	24	𝔖.	328	24	Tu.	358
25	W.	268	25	Fr.	298	25	M.	329	25	W.	359
26	Th.	269	26	Sa.	299	26	Tu.	330	26	Th.	360
27	Fr.	270	27	𝔖.	300	27	W.	331	27	Fr.	361
28	Sa.	271	28	M.	301	28	Th.	332	28	Sa.	362
29	𝔖.	272	29	Tu.	302	29	Fr.	333	29	𝔖.	363
30	M.	273	30	W.	303	30	Sa.	334	30	M.	364
			31	Th.	304				31	Tu.	365

METEOROLOGY.

The best meteorological observations now made in the neighbourhood of London are carried on at the Gardens of the Horticultural Society, Chiswick. As the observations published in the Transactions of the Horticultural Society have now accumulated, we have deduced from them he average results of ten years, presenting a near approximation to the climate of the latitude of the metropolis, unmodified by local causes.

The first Table should be compared with the Tables of Mr. Daniel and Mr. Howard, published in former volumes of the Almanack. The second Table is highly interesting: it will be seen by comparing the three hygrometic observations, that the dryness is greatest at noon, the humidity greatest in the evening. June is the dryest month; in October, November, December, January, the air is nearly saturated, morning and evening; in May, June, July, August, the dryness at noon is upwards of 10°; the mean temperature of the four months at this hour is 69°·0, there is only vapour enough present to saturate a temperature of 56°·8; the real difference or dryness is 12°·2.

The mean temperature at Chiswick was 50°·5; the precise degree fixed upon by Mr. Howard as the mean temperature of the latitude and level of London. These observations differ from others, in making *July*, and not *August*, the hottest month of the year; and this result is supported by the annual series of observations.

MODE IN WHICH THE OBSERVATIONS WERE MADE AT CHISWICK.

A Daniel's *Hygrometer* is used for ascertaining the state of the vapour in the atmosphere. Those by which the maximum and minimum of the temperature of the air in the shade are ascertained, are placed in an open spot in the Arboretum, screened from the rays of the sun, and sheltered from terrestrial radiation by a kind of umbrella of oiled cloth. They are attached to the northern side of the post which supports the umbrella, and stand four feet from the ground. That by which the maximum of heat is ascertained is filled with mercury; the one applied to registering the minimum of heat is a spirit thermometer.

In addition to these, two other register thermometers of the same construction are used. The first is of mercury, and the ball is covered with black wool. It is exposed to the sun, on the grass, in the Arboretum, about two inches from the ground, and thus shows the maximum degree of heat to which vegetation is exposed during the day. The second thermometer is of spirit; its ball is also covered with black wool, and is fixed in the focus of a parabolic metallic speculum, and exposed to the full aspect of the sky. It registers the maximum degree of cold arising from radiation in such a situation.

The *Rain gauge* (Howard's) stands upon the level of the ground in the Experimental Garden.

TABLE 1. *Temperature of the Atmosphere—Pressure—Aqueous Precipitation.*

1826—35.	Mean.	Maximum.	Minimum.	Mean Range.	Maximum.	Minimum.	Maximum in the Sun's Rays.	Minimum on the Earth.	Mean pressure in Inches.	Rain. Inches.
January	36°·5	41°·4	31°·6	9°·8	60°·0	10°	70°	3°	29·965	1·284
February........	40·7	46·8	34·6	12·2	65·0	10	80	4	29·935	1·530
March..........	43·5	51·1	35·9	15·1	75·0	21	95	8	29·955	1·410
April	48·8	58·2	39·4	18·8	78·0	24	105	12	29·890	1·870
May	55·7	66·7	44·7	21·0	86·0	28	126	16	30·047	1·864
June	60·8	71·7	49·9	21·8	91·0	37	125	26	29·962	1·864
July	64·0	75·3	52·7	22·5	94·0	40	126	32	30·001	2·617
August	62·3	73·4	51·2	22·1	86·	36	120	29	29·935	2·518
September	57·6	67·8	47·4	20·4	82	32	114	27	29·938	2·932
October	51·8	60·4	43·1	17·3	80	28	97	20	29·994	2·369
November	43·7	50·1	37·4	12·7	63	20	79	11	29·950	1·969
December	40·7	45·8	35·6	10·2	58	10	69	6	29·993	1·789
Year	50·5	59·1	42·0	17·1	94	10	126	3	29·9581	240·13

TABLE 2. *Humidity of the Atmosphere.*

1826—35.	MORNING.			NOON.			NIGHT.			MEAN.		
	Mean Temp.	Dew Point.	Dryness.	Mean Temp.	Dew Point.	Dryness.	Mean Temp.	Dew Point.	Dryness.	Temp.	Dew Point.	Dryness.
January......	35°·46	34°·67	0°·79	39°·92	37°·89	2°·03	36°·04	35°·54	°·50	37°·14	36°·03	1°·11
February	38·79	37·70	1·09	45·22	41·40	3·82	38·57	38·01	·56	40·86	39·03	1·83
March	41·95	40·17	1·78	49·93	41·93	8·00	40·80	39·87	·93	44·23	40·66	3·67
April........	47·88	45·40	2·48	55·91	46·12	9·79	45·21	44·06	1·15	49·66	45·19	4·47
May	55·44	51·26	4·18	64·39	52·07	12·32	51·34	49·91	1.43	57·06	51·08	5·98
June	61·22	56·52	4·70	69·38	56·33	13·05	57·52	55·53	1·99	62·71	56·13	6·58
July	64·08	60·05	4·03	72·02	60·17	11·85	60·64	59·02	1·62	65·58	59·75	5·83
August	61·67	58·75	2·92	70·29	58·70	11·59	58·82	57·61	1·21	63·59	58·35	5·24
September....	56·21	55.04	1·17	64·99	57·67	7·32	53·60	53·07	·53	58·27	55·26	3·01
October......	49·20	48·64	0·56	58·12	53·72	4·40	48·93	48·43	·50	52·08	50·26	1·82
November	41·91	41·32	0·59	47·76	45·40	2·36	42·46	42·04	·42	44·04	42·92	1·12
December	39·69	39.12	0·57	44·23	42·57	1·66	39·88	39·53	·35	41·27	40·30	0·97
Year	49·44	47·36	2·08	56·83	49·56	7·27	47·96	46·91	1·05	51·41	47·94	3·47

THE ROYAL COLLEGE OF PHYSICIANS,

PALL MALL, LONDON.

Founded 1522, *by Charter from King Henry VIII.*

DE PERMISSIS.

1. Statuimus et ordinamus ut nemo in Permissorum numerum eligendus proponatur, qui non annum ætatis suæ vicesimum sextum se clausisse Præsidentem et Censores, in Comitiis Minoribus,* certiores fecerit.

2. Nemo in Permissorum numerum admittatur, qui non prius Præsidentem et Censores certiores fecerit, per literas testimoniales à Comitiis Minoribus approbandas, sese Disciplinæ Medicæ studiis per quinquennium integrum incubuisse.

Disciplinam autem Medicam hæc precipuè studia complecti volumus: scilicet, *Anatomicen; Medicinam*, *theoreticam*, *practicam*, et *forensem; Chemiam; Materiam Medicam; Historiam Naturalem*, præcipuè *Botanicen; Artem Obstetriciam;* et *Chirurgiæ Principia.*

Statuimus insuper et ordinamus, immo hoc summi esse censemus, ut nemo in Permissorum numerum admittatur, qui non priùs sese Medicorum praxi in Nosocomio aliquo idoneo triennium integrum consuevisse, per literas testimoniales Comitiis Minoribus prolatas, comprobaverit.

Nullum vero Nosocomium ad hoc idoneum judicamus quod pauciores quàm centum ægros in cubiculis continere soleat, vel quod non sibi adscitos habeat tàm Medicos quàm Chirurgos.

Si quis autem foris ad medicinam institutus in Permissorum numerum admitti petat, is priùs in Comitiis Minoribus solito more comprobet, sese non tantùm iisdem studiis, quæ nostratibus jam antè injunximus, quinquennium apud suos impendisse, sed et Medicorum praxi intra Britanniarum fines per annum integrum in Nosocomio aliquo idoneo invigilâsse.

3. Nemo in Permissorum numerum admittatur qui medicamentum quodvis arcanum (*nostrum* vulgò dictum) in morbis curandis usurpare solitus fuerit; nisi ante examinationem primam id medicamentum, ac ejusdem adhibendi modum, Præsidenti aut Propræsidenti et Censoribus plane exposuerit.

4. Nemo in Permissorum numerum admittatur qui non prius examinatus et approbatus fuerit, in tribus Comitiis minoribus, secundum hanc formam:—

Unusquisque eorum qui in numerum Permissorum admitti petat, examinetur:—

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* Comitia Minora dicuntur, quæ habentur à Præsidente et Censoribus, cum aliàs, quoties ipsis visum fuerit, tum primo die Veneris, singulis mensibus, quo die Examinationes institui solent in ædibus Collegii. Comitia Majora à sociis universis celebrantur.

In Primis Comitiis, in parte Medicinæ Physiologicâ.
In Secundis, in parte Pathologicâ.
In Tertiis, in parte Therapeuticâ.

Ineunte examinatione primâ, interroget examinandum Præsidens vel Propræsidens ubinam bonas literas et scientiarum principia didicerit? quibus in Academiis commoratus sit? et quibus denique honoribus gradibusve, sive ad Philosophiam et Disciplinas humaniores, sive ad Medicinam ipsam pertinentibus decoretur.

Hisce quæstionibus responsa, ut literis illicò mandentur, et inter annales nostros conserventur, curet Registrarius.

Præterea examinetur in Græcis literis ad Medicinam spectantibus, scilicet in Hippocrate, vel Galeno, vel Aretæo. Proponantur unicuique in primâ examinatione loci ex Aphorismis Hippocratis, vel è Galeno; in secundâ et tertiâ examinatione loci ex Hippocrate, vel Galeno, vel Aretæo, qui Latinè reddantur, et brevi commentario illustrentur. Si quis autem in Græcis literis parùm profecisse videatur, is saltèm e Celsi vel Sydenhami operibus, vel quovis alio libro Latino ad Medicinam spectante, locum Anglicè reddat.

Singulæ Examinationes prædictæ Latinè fiant, et Anglicè etiam, si quando id visum fuerit Censoribus.

5. Qui ad hanc formam in Comitiis minoribus examinatus et in singulis examinationibus approbatus fuerit, in Comitiis majoribus proximè insequentibus proponatur in Permissorum numerum admittendus, et si major pars Sociorum præsentium consenserit, quamprimum admittatur.

6. Si vero quispiam in unâ quâvis Examinationum prædictarum, minus peritus, nec ad Medicinæ facultatem in urbe Londino et intra septem milliaria in circuitu ejusdem exercendam idoneus existimatus fuerit, non nisi præterito integro anno ad Examinationem iterum admittatur.

7. Antequam quispiam in numerum Permissorum admittatur, det fidem infra-scriptam Præsidenti aut Propræsidenti, coram Sociis in majoribus Comitiis:—

> "Dabis fidem te observaturum statuta Collegii, aut mulctas tibi contra facienti irrogandas promptè persoluturum, omniaque in Medicinâ faciendâ pro viribus facturum in honorem Collegii et Reipublicæ utilitatem."

8. Admittendus flexis genubus,* manus invicem applicatas humiliter tradat in manus Præsidentis vel Propræsidentis, qui dicat:—

> "Ego *A. B.* Præsidens, vel Propræsidens, hujus Collegii admitto te ad Medicinæ facultatem in urbe Londino et per septem milliaria in circuitu ejusdem exercendam quamdiu te bene gesseris, precorque tibi omnia fausta."

9. Si quis vero in urbe Londino, aut per septem milliaria in circuitu ejusdem, Medicinæ facultatem exercuerit, qui ad hoc per Præsidentis et Collegii literas sigillo nostro communi sigillatas non sit admissus; auctoritate Præsidentis et Censorum, si modo ipsis aut eorum majori

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* Si quis religionis causâ genua flectere nolit, hoc prætermitti potest.

parti ita visum fuerit, admoneatur per schedulam in manus traditam, vel in domo ejus relictam, ut medicinam exercere desinat, donec examinatus et approbatus fuerit, literis ad hoc datis sigillo Collegii munitis.

Qui monitum hoc neglexerit, legibus regni obnoxius erit.

10. Quandoquidem fieri potest ut viri sint quidam de arte nostrâ optimè meriti, qui tamen disciplinæ medicæ studia non omnino secundum normam à nobis injunctam prosecuti fuerint; statuimus et ordinamus ut, non obstantibus præmissis, siquando horum aliquis, peracto anno ætatis suæ quadragesimo, in Permissorum numerum admitti petat, testimonia quæcunque protulerit tam de ejus moribus, quam doctrinâ scrutentur et expendant Censores; et, si ita sibi visum sit, in Comitiis majoribus proximè habendis palàm explicent, impetrentque de iis Collegii sententiam; sin autem major pars Sociorum in illis Comitiis præsentium, suffragiis per pilas occultè acceptis, consenserit, instituantur quamprimùm commodè fieri poterit examinationes ordinariæ, uti de Permissis jam antè præceptum est.

DE CONVERSATIONE MORALI ET STATUTIS PŒNALIBUS.

1. Nullus sive Socius, sive Permissus fuerit, Socium aut Permissum ignorantiæ in arte suâ vel maleficii nomine, nisi coram judicibus legitimis accuset, aut coram quibusvis afficiat contumeliis. Si quem contrà fecisse Præsidenti et Censoribus aut eorum majori parti innotuerit, primâ vice solvat quatuor libras, secundâ vice duplicetur mulcta; quòd si tertio quis similiter deliquerit, et modo prædicto convictus fuerit, si quidem Socius fuerit, expellatur è Societate nostrâ, sin idem sit è Permissorum numero, solvat decem libras. Quam quidem decem librarum mulctam quotiescunque idem Permissus ejusdem delicti modo prædicto denuò convictus fuerit, ipsi irrogandam statuimus.

2. Nullus Socius, vel Permissus salutatione officiosâ, vel animi benevoli obtentu, opem medicam ultrò offerat, nedum subministret ægro cuilibet, quem Medici cujusvis, sive Socii, sive Permissi, curæ commissum esse cognoverit, et ad quem non accersitus fuerit.

3. Si quis autem malitiæ hujusmodi convictus fuerit, præter ignominiæ notam quam isti (quantum in nobis est) inuri volumus, quadraginta solidos mulctetur à Præsidente et Censoribus.

4. Si quis paciscatur cum Pharmacopolis de aliquâ pretii parte ex medicamentis præscribendis percipiendâ, si sit Socius, et hujusce delicti à Præsidente et majore parte Sociorum in Comitiis majoribus sive ordinariis sive extraordinariis præsentium convictus fuerit, è Societate nostrâ expellatur.

5. Sin Permissus delicti hujusce à Præsidente et Censoribus, aut eorum majore parte, convictus fuerit, decem libras quotiescunque id admiserit, mulctetur.

6. Medicus quisque, sive Socius, sive Permissus fuerit, singulis suis schedulis, in quibus ægri curatio præscribitur, diem præscriptionis, ægri nomen, et sui denique nominis literas initiales adscribat; nisi causa intersit à Præsidente et Censoribus approbanda.

7. Si plures Medici curationis gratiâ convenerint, consultandum est

summâ modestiâ, et non nisi semotis arbitris à re alienis. Nec quisquam præscribat, imò ne innuat quidem, quid agendum sit coram ægro, aut adstantibus, priusquam junctis consiliis inter ipsos Medicos curandi methodus fuerit constituta. Sin autem Medici in diversas iverint sententias, ita ut in eandem medendi methodum consentire nequeant, summâ tamen prudentiâ et moderatione se gerant; eorumque dissentionem ita, ut tàm ægro quàm amicis ejus quàm minimum molestiæ pariat, ordinarius medicus ægro aut adstantibus significet.

8. Qui leges has consultandi non observaverit, et à Præsidente et Censoribus aut eorum majore parte convictus fuerit, quinque libras mulctetur.

9. Nullus denique Medicus, sive Socius, sive Permissus, consilium ineat de rebus Medico propriis, in civitate Londino et intra septem milliaria in circuitu ejusdem nisi cum aliquo è Sociorum vel Permissorum numero, sub pœnâ quinque librarum quotiescunque hujusce delicti à Præsidente et Censoribus, aut eorum majore parte convictus fuerit.

10. Omnes mulctæ quæ per statuta nostra irrogatæ fuerint illicò solvantur.

DE PERMISSIS EXTRA URBEM.

1. Nemo ad Medicinam extra urbem Londinum et septem milliaria in circuitu ejusdem exercendam admittatur, qui non annum ætatis suæ vicesimum sextum clauserit, et non in aliqâ Academiâ, aut in aliquo Nosocomio Londinensi per annum integrum, aut in Nosocomio Provinciali per biennium, animo Medicinæ studendi commoratus fuerit, et præterea Prælectiones Anatomicas et Medicas audierit; de quibus omnibus Præsidentem, vel Propræsidentem, fecerit certiorem.

2. Nemo in numerum Permissorum extra urbem admittatur qui non priùs à Præsidente et tribus Electis examinatus et approbatus fuerit, quemadmodum legibus regni cautum est.

3. Examinatio Latinè fiat.

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Sutherland, Dr. A. J., *Parliament-street*
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Tierney, Sir M. J., Bt., *Bruton-street*
Todd, R. B., M.D., *Parliament-st.*
Todd, Dr. Tweedy J., *Brighton*
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Towsey, Dr. Wm., *Lymington*
Turnbull, Dr. W., *Russell-square*
Turner, Dr. T., TREASURER, *Curzon-street*
Tweedie, Dr. Alexander, *Montague-place, Russell-square*
Vade, Dr. John Knox, *Upper Seymour-street*
Veitch, Dr. James, *Richmond-sq.*
Venables, Robert, M.B., *Ely-place*
Warburton, Dr. John, *Clifford-st.*
Waring, Dr. K., *Chiselhurst*
Waterfield, Dr. T., *Charles-street, St. James's-square*
Watson, Dr. Thomas, *Henrietta-street, Cavendish-square*, CENSOR
Webster, Dr. John, *Lower Grosvenor-stret*
Weatherhead, Dr. George Hume, *George-street, Hanover-square*
Whiting, Dr. J., *Kennington Common*
Whitsed, Dr., *Wisbeach*
Whitter, Dr. Tristram
Whymper, Sir W., Knt., *Weymouth-street*
Wightman, Dr. C., *Newcastle-on-Tyne*
Wightman, Dr. R., *Southampton*
Wilkinson, Dr. C., *Hoxton-sq.*
Wilks, Dr. G. A. F.
Willan, Leonard, R., M.B., *Penzance*
Willis, Dr. F., *Shillingthorpe*
Willis, Dr. R., *Dover-street*
Willis, Dr. T., *Sackville-street*
Williams, Dr. Charles James Blasius, *Half-Moon-street*
Williams, Dr. John
Williams, Dr. Robert, *Bedford-pl.*
Williams, Dr. W. H., *Ipswich*
Williams, Dr. W. D., *Hackney*
Wilmot, Dr. John Bramston, *Tunbridge-wells*
Wilmot, Dr. William Byam, *Queen's place, Kennington*
Wilson, Dr. James A., *Curzon-st.*
Wilson, Dr. John, *Wimpole-st.*
Wilson, Dr. Thomas, *Pocklington*
Wilton, Dr. John, *Chertsey*
Wood, Dr, George Edward Wilmot, M.D., *Half-Moon-street*
Wright, Dr. Warner, *Norwich*
Yelloly, Dr. John, *Wootton Hall, Norfolk*
Yonge, Dr. James, *Plymouth*

Fellows pay on admission 95*l.* 4*s.*; Licentiates 56*l.* 17*s.*; Extra Licentiates 17*l.* 9*s.* Stated income of the College 4116*l.*; expenditure 4822*l.* Eleven years, 1823—33,—Licentiates examined, 133; rejected 7; 1 in 19.

The Lectures are delivered in the Theatre at the College, on Wednesdays and Fridays, at four o'clock, P. M., commencing in May. They are delivered in the following order:

The Gulstonian, three Lectures.
The Croonian, three Lectures.
The Lumleian, three Lectures.
On Materia Medica, six Lectures.

The Evening Meetings (at which Medical Papers are read) are held on the last Monday of each Month, from January to June inclusive, at nine o'clock, P.M.

The Harveian Oration is delivered in the Library of the College, on June 25th, at four o'clock, P.M.

ROYAL COLLEGE OF SURGEONS IN LONDON,
LINCOLN'S-INN FIELDS.

Founded, 32 *Henry VIII.*—*Chartered*, 1800.—*Rebuilt*, 1836.

COUNCIL.

President.—H. L. Thomas, *Leicester-place*

Vice-presidents.—R. Keate, *Albemarle-street*

J. P. Vincent, *Lincoln's Inn Fields*

* Sir A. P. Cooper, Bart., K.G.H., *Conduit-street*

*Sir Anthony Carlisle, *Langham-place*

*G. J. Guthrie, *Berkeley-street*

*A. White, *Parliament-street*

*J. G. Andrews, *St. Helen's-place*

*S. Cooper, *Woburn-place, Russell-square*

T. Copeland, *Golden-square*

J. Howship, *Saville-row*

J. Briggs, *Edgeware-road*

W. Lawrence, *Whitehall-place*

*Sir B. C. Brodie, Bart., *Saville-row*

B. Travers, *Bruton-street*

J. Swan, *Tavistock-square*

E. Stanley, *Lincoln's-Inn Fields*

J. H. Green, *Hadley, Middlesex*

Th. Callaway, *Wellington-street, Southwark*

G. G. Babington, *Golden-square*

Frederick Tyrrell, *New Bridge-st., Blackfriars*

Honorary Class of retired Members of the Council.—

J. Gunning, *Paris*

J. A. Hawkins, *Great Marlborough-street*

Sir C. Bell, K. G. H., *Edinburgh*

Professor.—R. Owen.

Secretary.—E. Belfour.

Librarian.—R. Willis.

Assistant-Librarian.—T. M. Stone

Conservators of the Museum.—W. Clift, R. Owen

Beadle.—W. Stone

The Hunterian Museum is 90 feet in length, and 40 in width; lofty, and lighted by arched skylights. Skeletons of vertebrata, the skeleton of the elephant Chuny, and of O'Byrne, the Irish giant, Crania, the cast of a living negro, the remains of the Megathrium, four cabinets of specimens in comparative anatomy, and a choice selection of fossil fishes merit attention on the floor. The specimens illustrating the structure of bone in different classes of animals, and the development of the teeth, are admirable. The two galleries contain the preparations in spirit; the lower gallery contains the Hunterian collection. Its state of preservation, after the lapse of fifty years, full of embarrassment, reflects great honour on Mr. Clift, the excellent conservator. The classification of the specimens, and the catalogues, facilitate the study of the collection. Mr. Owen last year delivered an interesting course of lectures, illustrative of the specimens in the museum, which his labours have so much enriched. This will, we hope, be continued annually.

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* Examiners.

The *Library*, it was stated by Sir B. Brodie, in the Hunterian oration, contains 20,000 volumes: great additions are now making to its stores, under the direction of the talented librarian, Dr. Willis. 1200 foreign works alone have been ordered. The college library will shortly contain a collection of medical literature not surpassed by the collections of foreign libraries.

The Library is open daily, Sundays excepted, to members and articled students of the college, from ten until four o'clock, except during the month of September. Other persons desirous of admission must make application, in writing, to the Library Committee, specifying their christian and surnames, rank or profession, and residence.

In the ten years (1823—32) the College received 71,371*l.* for diplomas; 18,236*l.* of which were paid to the examiners. Expenditure (June 1836—7) 9991*l.*, and 7066*l.* on the buildings. The Courts of Examiners received from students 11,354*l.*; 1299*l.* were from dividends on stock. Salaries, 1833: secretary, 500*l.*; librarian, 430*l.*; conservator, 436*l.*; assistant to conservator, 275*l.*; beadle, 180*l.* Total salaries, 2180*l.*; Examiners 3050*l.*; council, 425*l.*; dinners of council, 90*l.*; of examiners, 39*l.* expended on library, 334*l.*—*Parl. Return.*

The Council is self-elective; the appointments are for life. The ten examiners are usually chosen from the senior members of the council; the offices of President and Vice-presidents are filled by the Examiners in annual rotation.

Regulations of the Council respecting the Professional Education of Candidates for the Diploma.

I. They will be required to bring proof:

1. Of being twenty-two years of age.

2. Of having been engaged five years in the acquirement of professional knowledge.

3. Of having studied Anatomy and Physiology, by attendance on Lectures and Demonstrations, and by dissections, during two anatomical seasons of seven months each.

4. Of having attended at least two courses of lectures on Surgery, delivered in two distinct periods or seasons, each course to comprise not less than Sixty Lectures.

5. Of having attended Lectures on the Practice of Physic, on Chemistry, and Midwifery, during six months; comprising not less than sixty Lectures respectively; and on Botany and Materia Medica during three months.

6. Of having attended during twelve months the surgical practice of a recognised hospital in London, Dublin, Edinburgh, Glasgow, or Aberdeen; or for six months in any one of such hospitals, and twelve months in any recognized provincial hospital.

II. Members and Licentiates in Surgery of any legally constituted College of Surgeons in the United Kingdom, and graduates in Surgery of any University, will be admitted for examination.

The College now examines lecturers.

All the required Certificates are to be delivered at the College ten days before the Candidate can be admitted for examination.

Courts of Examiners are appointed for the first Friday of every month; from July 1st, 1833, to July, 1834, however, fifty-three courts were held.

Registraiton of Pupils. — The first fifteen days in February, May, August, and November.

Regulations issued June, 1838, and which will come into operation after the termination of the Session 1839—1840.

I. Candidates will be required to bring proof:

1. Of being not less than twenty-one years of age.

2. Of having been engaged in the acquirement of professional knowledge for not less than four years, three of which shall have been passed in a recognized school or schools of Surgery; three months of vacation being allowed in each year, and in the event of absence or absences from such school or schools during the said term of three years, (exclusive of the vacations,) the full term being completed in a subsequent year.

3. Of having studied Anatomy and Physiology, by attendance on Lectures and Demonstrations, and by Dissections, during two Anatomical Seasons.*

4. Of having attended at least two courses of Lectures on Surgery, delivered in two distinct periods or winter seasons of six months, each course to comprise not less than 70 Lectures.

5. Of having attended one course of Lectures on the practice of Physic, and one on Chemistry, during six winter months, comprising not less than 70 Lectures respectively; one course on Materia Medica with Medical Botany, during six months, and one on Midwifery during six months, each comprising not less than 60 Lectures; and, at least, 25 Lectures on Medical Jurisprudence.

Certificates of attendance on these Lectures during the summer season will be received, provided they are equally divided over a period of four months.

The Lectures on Medical Jurisprudence may be delivered three days in the week.

6. Of having attended, during twenty-one months, the surgical practice of a recognized Hospital in London, Dublin, Edinburgh, Glasgow, or Aberdeen; or for twelve months in any one of such Hospitals, and twelve months in any recognized provincial Hospital.

7. Of having attended the Medical Practice of an Hospital or Dispensary during six months.

II. Members and Licentiates in Surgery of any legally constituted College of Surgeons in the United Kingdom, and Graduates in Surgery of any University requiring residence to obtain Degrees, will be admitted for examination on producing their Diploma, Licence, or Degree, together with proofs of being twenty-one years of age, and of having been occupied at least four years in the acquirement of professional knowledge.

N.B. Certificates will not be recognised, in future, from any Hospital, unless the Surgeons thereto be members of one of the legally constituted Colleges of Surgeons in the United Kingdom; nor from any school of Medicine or Midwifery, unless the respective teachers be members of some legally constituted College of Physicians or Surgeons in the United Kingdom; nor from any school of Anatomy or Surgery in England, unless the respective teachers be members of some legally constituted College of Physicians or Surgeons in the United Kingdom, and have undergone a second or special Examination on those branches of science, according to the Ordinances relating thereto.

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* An Anatomical Season is understood to extend from October to April inclusive, and to comprise at least 140 Lectures on Anatomy and Physiology, occupying not less than one hour each, given on separate days; and at least 100 Demonstrations of the like duration, given in a similar manner, exclusive of dissections, of which distinct certificates are required.

Certificates will not be received, in future, on more than one branch of science from one and the same Lecturer; but Anatomy and Physiology, Demonstrations and Dissections, Materia Medica and Botany, will be respectively considered as one branch of science.

In the Certificates of attendance on Hospital Practice and on Lectures, it is requested that the dates of commencement and termination may be inserted in words at length.

Blank forms of the required Certificates may be obtained on application to the Secretary, to whom they must be delivered, properly filled up, ten days before the Candidate can be admitted to Examination, and all such Certificates are retained at the College.

The subject for the COLLEGIAL TRIENNIAL PRIZE of 1839 is,

"To determine the diameters, disposition, and modes of communication of the continuous capillary Arteries and Veins, both in the pulmonic and general circulations. The subject to be illustrated by injected and other preparations, both of the human body and of inferior animals."

JACKSONIAN PRIZE.

The Prize subject for the year 1839 is,

"The nature, symptoms, and treatment of Concussion of the Brain, and of the other forms of Cerebral Injury resulting from external violence."

Candidates to be Members of the College, not of the Council.

The Dissertations to be in English, and to be distinguished by a motto or device, accompanied by a sealed paper, containing the name and residence of the author, and having, on the outside, a motto or device corresponding with that on the Dissertation.

Dissertations, addressed to the Secretary, to be delivered at the College before Christmas day, 1839.

COLLEGE OF SURGEONS.

List of Gentlemen who have passed their Examination from Sept. 30, 1837, to Sept. 30, 1838.

A.

Adams, J. J. London, Aug.; Agnew, J. W. Ballydare, Antrim, April; Alford, R. Taunton, July; Allender, G. Londonderry, May; Anderson, R. C. Myshall, Carlow, June; Andrews, C. G. London, Aug.; Anningson, J. Patrington, York, May; Anwyl, R. H., P. Edward's I. Dec.; Ardagh, John, Madras, Oct.; Arnold. B. N. Birmingham, Aug.; Arthur, J. Limerick, June; Askwith, R. Leeds, July; Aspland, A. Hackney, April; Atherstone, W. G. Cape of Good Hope, May; Attlay, H. C. Stamford, June.

B.

Babington, C. M. S. London, May; Babington, W. F. Bombay, Aug.; Bacon, R. North Walsham, April; Baker, F. M. Botley, Hants. Aug.; Baker, J. London, April; Bakewell, G. Spring Vale, Stafford. April; Ballie, F. London, April; Bampton, G. E. L. Plymouth, May; Barclay, F. Shetland, July; Barker, A. Haatstown, Carlow, June; Barlow, W. F. Writtle, Essex, Jan.; Barrett, T. B. Shrewsbury, May; Barry, E. Kerry, June; Barton, T. H. Long Stratton, Feb.; Bartrum, J. S. Bath, May; Batt, E. D. Brecon, Aug.; Baxter, R. T. C. London, Feb.: Baylie, W. H. W. Cork, April; Baynes, W. W. Adstock, Bucks. Oct.; Beales, J. C. New York, Aug.; Beard, F. C. March; Beckett, A.M. A. London, March; Bell, A. Horncastle, May; Bell, J. H. Bristol, Jan.; Berston, W. C. London, Dec.; Betts. G. B. Jan.; Bickersteth, H. Cape of Good Hope, Jan.; Bidwell, Henry, Albrighton, Salop, Oct.; Blakely, W. Kington, Hereford, May; Blanchet, D. Lower Canada, April; Bligh, R. Calcutta, July; Bloxam, H. Newport, Isle of Wight, Dec.; Bluemitt, J. Calcutta, July; Bond, G. Yarmouth, May; Borrer, J. Brighton, Dec.; Bostock, J. A. London, June; Boulton, J. Pontypool, April; Bourne, T. Alford, March; Bowker, R. R. S. Appleby, May; Bowling, H. H. Hammersmith, Jan.; Bowness, R. H. Poulton, May; Boyes, W. R. London, May; Boyton, J. E. Cork, June; Braddon, C. Crediton, May; Brade, J. Liverpool, Aug.; Bradford, W. Chepstow, July; Brandon, J. London, Aug.; Brewster, R. G. July; Brierly, S. Ashton-under-Lyne, May; Brighton, J. G. Osbersley, Aug.; Brunton, J. West Bromwich, May; Bryan, R. Stowmarket, Jan.; Buckley, W. H. G. Bradford, June; Bunce, J. S. London, Feb.; Burkett, John, Upper Clapton, Oct.; Burman, T. S. Stratford-on-Avon, July; Burrow, D. Prescott, May; Burrows, P. Demerara, June; Burton, J. M. Rochester, May; Burton, T. C. London, June; Butcher, R. G. Army, July; Butlin, G. Daventry, March.

C.

Caddy, W. H. Torrington, Aug.; Calder, G. Manchester, April; Campbell, R. L. London, April; Campbell, W. H. Sherborne, May; Cappar, L. T. Nantwich, June; Carter, H. J. Budleigh Salterton, May; Cartwright, R. M. New S. Wales, April; Cartwright, S. London, March; Cawdle, R. Brighton, November; Chadwick, F. R. Long Ashton, July; Chapman, C. Tooting, October; Charlton, J. S. Rochester, May; Child, H. Hereford, June; Childs, G. B. Liskeard, May; Chinery, E. Suffolk, January; Christie, J. Aberdeen, May; Clare, H. J. Wicklow, July; Clark, W. S. York, December; Clarke, B. London, December; Clarke, J. Penrith, June; Clarke, J. S. Islington, June; Clayton, O. M. P. London, May: Cleaver, H. A. Camberwell, May; Clifford, J. Camberwell, August; Coales, J. St. Albans, July; Cobb, L. B. London, July; Coe, T. Bury St. Edmunds, July: Colebrook, J. Petworth, August; Colhoun, R. B. Donegal, May; Collins, C. Maryport, Cheshire, January; Collings, A. Guernsey, July; Collison, R. P. Liverpool, April; Cook, J. Clydach, May; Cooke, W. R. Northampton, May; Cooper, P. Leicester, April; Coote, H. London, July; Cotes, H. London, May; Cotterell, T. R. Campden, December; Couch, R. Q. Polpero, Cornwall, March: Cox, C. L. Kildare, May; Crabb, A. London, May; Craig, J. Aberdeen, August; Crawford,

H. Feversham, April; Creagh, M. Ennis, June; Creed, C. Halifax, Nova Scotia, April; Croghan, D. G. Wexford, August; Croker, Dillon Henry, Cork, October; Crondace, G. P. Chester-le-street, March; Crook, J. Norwich, August; Crooke, W. Co. Cork, March; Curtis, F. B. London, August; Cuthbert, W. Mendlesham, November.

D.

Darvill, J. T. November; Dascnt, B. J. London, April; Davies, D. Merthyr-Tydvil, May; Davies, J. Tipton, Staffordshire, November; Davis, J. London, October; Davis, J. W. ———, March; Davis, T. Manahamilton, May; Day, H. Sydney, Sept.; Deans, W. Pontefract, Mar.; De la Hooker, Gravenhurst, Apr.; Denton, J. R.N. Aug.; Dicken, P. Exeter, April; Dingley, T. K. Devonport, Aug.; Dolton, W. B. London, Apr.; Douglas, G. —, Dec. Donne, J. T. Norfolk, Nov.; Dowling, J. H. Newcastle, Limerick, Nov.; Dry, G. Oxford, August: Duckworth, W. Addingham, York, May; Duff, W. H. Islington, June; Dyce, T. R. Aberdeen, July.

E.

Easton, J. B. Plymouth, July; Edge, J. Ipswich, February; Edwards, C. Armagh, August; Edwards, C. F. Bedford, July; Edwards, J. A. Stratton, Cornwall, March; Elliott, R. C. Artillery, July; Espinet, J. Trinidad, August; Ethelston, E. Manchester, May; Euston, A. Bengal, April; Evans, T. Little Hampton, December; Evans, A. London, June; Evans, E. York, April.

F.

Farquhar, A. Aberdeen, Aug.; Fen, T. H. Neyland, Suffolk, March; Fitzgerald, J. P. Dublin, May; Fitzpatrick, D.C. East Indies, Oct.; Flexman, J. Southmolton, Aug.; Fletcher, W. Tean, Stafford, July; Fogarty, F. Drogheda, May; Foster, T. Manchester, June; Foster, T.W. Sheffield, Aug; Fox, E.F. Bristol, April; Fox, F. London, July; Fox, J. Cavan, April.

G.

Glascott, J. New Ross, Aug.; Going, J. Tipperary, July; Going, T.R. Limerick, Nov.; Goodwin, G. Ashborne, Derby, July; Gorlam, R. V. Holesby, Suffolk, Oct.; Goude, J.F. London, May; Grant, T.C. August; Granville, J. W. London, March; Greig, C. Bristol, April; Griffin, W. Deddington, May; Griffiths, R. Worcester, April; Griffith, W. Llanwist, March; Groves, W.E. Cork, Aug.; Guest, E. Birmingham, July; Guthrie, C.W.G. April.

H.

Haines, H. West Bromwich, Aug.; Hales, H. Brixton, Nov.: Haine, J.H., R.N., July; Hare, E. Stanhoe, May; Hare, L. London, Aug.; Hare, H. W. Yoxall, Stafford, Aug.; Harper, T. Plymouth, Jan.; Harvey, J. Penzance, Oct.; Havers, J. Thelton, Norfolk, Dec.; Hawkins, J. Newport, Monmouth, June; Hawkins, J. Carmarthenshire, March; Haynes, W. Quenington, Gloucestershire, Jan.; Heaton, C. Endon Staff, March; Helmer, J. Ronaldkirk, York, March; Henningway, H. J. Dewsbury, Aug.; Hempe, A. Exeter, April; Hetherington, E. Ropley, Hants, Oct.; Hey, S. Leeds, April; Hickson, R. Dingle, Kerry, May; Higham, R. Whaley, Lancaster, June; Highmore, W. Sherborne, July; Hiley, J. Elland, York, June; Hills, R. Maidstone, May; Hiron, W. Campden, May; Hitchings, T. Oxford, July; Hitchman, J. Fairfield, Gloucester, May; Hobson, A. Wicklow, Dec.; Hobson, B. Birmingham, April; Hobston, E. C. Australia, April; Hodson, C. F. Islington, Dec.; Holcombe, A. C. Pembroke, April; Holden, L. London, Jan.: Hole, R. Wivelscombe, May; Hollins, M.D. Manchester, Aug.; Holm, J. W. Jan.; Holmes, C. Oxford, April; Holmes, J. Castle Fenn, April; Houghton, J. H. Dudley, April; Houseman, J. Richmond, York, Oct.; Hovell, T. H. Clapton, Feb.; Howard, E. Portsmouth, Aug.; Howard, H. Tullamore, May; Howells, R. H. Carmarthen, April; Hoyland, E. London, July; Hull, B. Plymouth, June; Humble, T. Newcastle, June; Hunter. J. jun. Islington, Oct.; Husband, W. D., York, Jan.; Hussey, J. T. Roscommon, June; Hughes, W. Cheltenham, Nov.; Hyett, F. Cheltenham, Nov.; Hynes, D. J. County Galway, July.

I.

Ingram, A. Turriff, Aberdeen, Aug.; Irwin, R. P. Dublin, May; Irons, J. Clones, June; Isbell, J. W. Plymouth, Nov.; Jack, A. A. Plymouth, Aug.; Jamieson, W. Newcastle-upon-Tyne, April; Janson, W. A. Scaham, Durham, July; Jenkins, C. F. Thames Ditton, May; Jenkins, R. L. Newport, Monmouth, Jan.; Jewell, H. Cornwall, Nov.; Johnston, G. M. Nova Scotia, June; Johnston, R. Enniskillen, Jan.; Jones, E. London, May: Jones, G. Birmingham, March; Jones, H. F. Malmsbury, March; Jones, J. Denbigh, May· Jones, J. E. Oakham, Aug.; Jones, W. G. Neath, Nov.; Jordan, D. Castlebar, August; Jowett, J. Lincoln, April.

K.

Kent, J. H. Stanton, Aug.; Kent, J. C. London, Feb.; Kenyan, J. Liverpool, July; Kesteven, W. B. London, March; Keyser,

A. London, August; Keywork, H. London, March; Kiernan, O. Cavan, March; Kinsey, R. B., E. I., March; Kirkby, T. W. B. Leamington, June; Kitson, E. P. Bath, August; Knapp, J. M., E. I., Nov.; Knight, K. E. Calcutta, July; Knight, M. London, June; Knowles, E. Soham, Cambridge, June; Knowles, E. Y. Godalming, Feb. : Kay, S. R. Bolton-le-Moors, May.

L.

Laking, F. A London, Feb.; Lanejan, F. J. Ballymahon, June; Larcombe, J. Ilminster, May; Laxton, H. Bristol, June; Lee, T. Dublin, Nov.; Levinge, R. H. Lewes, Nov.; Lewis, T. Carmarthen, May; Lidbetter, G. S. Tonbridge Wells, June; Lidderdale, J. Hungerford, Feb.; Lipscomb, J. H. Winchester, Nov.; Lloyd, D. London, May; Lloyd, G. Limerick, March; Londale, H. Carlisle, May; Loney, W. Cashell, June; Lowry, J. H. Raphoe, Donegal, May; Lowry, J. L., E. I., April; Lucas, S. J. W., A., June; Lucas, D., A., May; Lunn, W. J. Sculcoates, Hull, May; Lynch, H. Carlow, April; Lynch, J. B. London, January; Lyon, W. Sherborne, May.

M.

M'Bride, M., Army, July; M'Cullock, W. Belfast, Nov.; M'Dermott, W. Newton, Forbes, May; M'Evoy, F. J. Bulbuggin, Aug.; Macintyre, J., E. I., June; Mackenzie, F. W. London, Nov.; Maclise, J. London, Oct.; M'Nicoll, D. H. Liverpool, Jan.; M'Nish, C. Demerara, June; Manlove, J. Nottingham, June; Manning, S. Wicklow, June; Mann, C. P. Colchester, Dec.; Margetts, F. Hilton, St. Ives, Feb.; Martin, A. Edgbaston, May; Martyn, C. J. Greenwich, May; Mather, T. Aston-le-Willows, April; Master, A. Norwich, April; Mathias, D. London, July; Matthews, R. Norwich, May; Matthias, J. E. Sandback, May; Mawe, T. Tralee, June; Meredith, J. Leominster, October; Miller, C. M. London; Milner, W. R. Wakefield, Feb.; Moffit, Andrew, Fermanagh, April; Molloy, R. London, April; Montgomery, H. Dublin, Oct.; Moorhead, W. Army, Feb.; Morison, C. Barnet, Feb.; Moss, G. Whisby, Lincolnshire, Oct.; Mottley, G. Portsmouth, May; Mouat, F. J. London, July; Mullane, A. O. Buttevant, Cork, May; Mulreany, M. Donegal, April; Murphy, C. Seariff, Co. Clare, July; Murphy, T. S. Dublin, Oct.

N.

Nance, J. Portsmouth, June; Nankwell, J. H. St. Columb, March; Neville, A. R. Toronto, Canada, July; Newton, E. Hexham, May; Nicoll, J. C. T. Worcester, May; Nightingale, R. S. Liverpool, June; Nowell, S. London, March; Nutt, W. C. Plymstock, Devon, Aug.

O.

Obré, H. Chelsea, Aug.; O'Donnell, J. Kilrush, Clare, Dec.; O'Hara, H. Dublin, June; O'Hagan, H. Dudalk, Dec.; Osborn, S. London, June; O'Shaughnessy, J. Limerick, Oct.; Otway, C. W. C. Southwark, July.

P.

Packard, H. Middleton, Suffolk, Jan.; Parker, N. E. St. Neots, July; Parkinson, C. B. Northampton, May; Parrett, T. Newport, April; Parry, E. Crickhowell, Feb.; Parry, R. L. Conway, N. W. April; Parsons, Joshua, Laverton, Somersetsh. Oct.; Partridge, J. Colchester, Dec.; Passmore, J. G. Bath, July; Pennington, H. Liverpool, May; Perry, G. M. London, April; Philbrick, C. J. Colchester, Aug.; Phillip, J. Aberdeen, June; Philpot, F. Bayswater, April; Pickering, C. W. East Indies, May; Piper, S. E. Ipswich, June; Pittock, F. W. Eltham, May; Pocock, G. E. Brighton, June; Popham, J. Cork, Dec.; Power, J. J. Maidstone, June; Prankerd, J. Langport, Feb.; Price, T. M. London, April; Pritchard, F. B. Humbledon, Hants, August; Prym, P. M.—R. N. May; Pughe, J. Cochybug, Carmarth. Oct.; Pumell, W. Bombay, Feb.

Q.

Qualtrough, A. Isle of Man, July.

R.

Raine, G. W. Elmsthorpe, Feb.; Rawes, W. W. Stratford, Essex, Aug.; Rawlins, H. A. Lincoln, June; Reed, W. Whitwell, Feb.; Reeves, W. Carlisle, Aug. Rendle, W. Southwark, March; Reynolds, F. B. Arlington, Gloucestershire, April; Richard, W. H. M. London, Aug.; Richards, W. N. Bath, May; Roberts, R. C. Ruabon, Nov.; Roberts, W. Gosport, Nov.; Robertson, J. B. Hendred, Berks, Oct.; Robinson, C. F. London, May; Robinson, J. London, Jan.; Robinson, J. Dublin, July; Robinson, J. W. London, July; Robinson, S. R. Gloucester, June; Rock, Dennis, Birmingham, Oct.; Rogers, J. H. London, Aug.; Rogers, N. Grantham, Feb.; Rogers, W. H. Shrewsbury, May; Romer, A. London, June; Rose, F. G. London, April; Rowbottom, J. Huddersfield, Nov.; Rundle, N. Callington, Oct.; Russell, J. Thurles, Tipperary, May; Rye, A. B. Banbury, Nov.

S.

Salmon, W. G., Thornbury, April; Salt, J. Betley, Stafford, August; Sangster, W. G. Banff; Sannemann, R. W.

Hounslow, July; Sawer, C. Ipswich, May; Scholfield, E. Ashton-under-Lyne, Aug.; Schoole, H. J. Jersey, Nov.; Scott, J. Jamaica, Feb.; Scott, R. J. H. Devon, Aug.; Seagrave, W. London, Jan.; Senior, C. Huddersfield, April; Shaw, Henry, Blackpool, Lancashire, Oct.; Shaw, S. W. Belfast, May; Shillito, J. York, March; Shillito, W. Calcutta, Feb.; Shutter, G. London, July; Shuttleworth, W. Manchester, May; Shuter, R. V. Bengal, May; Simon, J. London, Aug.; Smart, J. C. Hutton Buishall, York, March; Smith, A. R. Chertsey, May; Smyth, F. Bonnington West, May; Smith, G. H. Radstone, Northampton, Nov.; Smith, J. Derby, April; Smith, J. Leeds, April; Smith, H. Plymouth, June; Smith, W. Manchester, April; Snow, J. York, May; Southam, G. Manchester, July; Sparrow, J. W. Plymouth, April; Spurrell, F. Southwark, March; Squires, R. Liverpool, April; Stainthorpe, T. Hexham, June; Staley, S. Stroudwater, April; Stanbrough, H. Isleworth, March; Stanley, S. S. London, May; Steinhauser, J. F. London, May; Stephens, H. Exeter, Feb.; Stephens, J. May; Stephens, J. B. Madras, March; Stokes, J. M. Southampton, July; Story, W. London, May; Strover, T. R. Bengal, April; Sturton, W. Greenwich, May; Sweeney, D. Cork, Oct.; Swinburn, J. W. Liverpool, May; Symonds, W. Ilminster, May.

T.

Tailer, J. B. Woodbridge, Aug.; Tanner, R. E. South Molton, April; Tarrant, T. P. London, May; Tayler, C. Coulsten, May; Taylor, C. Boston, April; Taylor, C. London, June; Taylor, H. Devizes, Aug.; Taylor, H. S. Liverpool, June; Taylor, J. Hull, April; Taylor, P. New Brunswick, Aug.; Taylor, W. Leicester, Feb.; Taylor, W. Mortlack, Banffs, May; Thackeray, D. G. Nottingham, April; Thomas, D. Llandilo, Aug.; Thomas, D. J. Jamaica, Jan.; Thompson, M. D. Staley Bridge, May; Thomson, C. Exeter, Dec.; Thornton, J. London, April; Thurnall, W. Duxford, Cambridge, June; Timins, C. Gloucester, Aug.; Todd, J. W. Woburn, May; Tomlinson, J. Leeds, May; Townson, B. Liverpool, May; Toynbee, J. London, Jan.; Tranter, P. Guernsey, Aug.; Trousdale, W. M. Sheffield, Oct.; Tuomy, T. Kanturk, July; Turner, J. Swansea, Feb. Turner, N. B. Keymer, Sussex, Dec.; Turnock, R. Leek, May; Tuttiett, F. B. Newport, Isle of Wight, May; Tweeddale, J. D. London, April.

U.

Unwin, D. Coggleshall, April.

V.

Vaudney, T. P. Cranbourne, May; Veal, W. London, Jan.

W.

Wakefield, F. Army, Feb.; Waldron, H. London, July; Walker, D. R. G., R. N. June; Walker, G. Ardmore, Boyle, June; Wallace, D. N. Boyle, August; Waller, F. H. Faversham, July; Walsh, E. J. Trinidad, June; Ward, J. Kilpinpyke, York, Decem.; Ward, W. Penang, May; Warren, W. J. South Brent, Somerset, Aug.; Wasbrough, C. G. J. Bristol, May; Waters, C. F. Madras, Mar.; Watts, C. F. London, May; Weatherhead, F. T. Kentish Town, May; Weathers, G. Lambeth, April; Webb, C. Basingstone, June; Webster, E. A. Weldon, Northampton, July; Wells, R. F. Highgate, July; Welsh, T. J. Newport, Monmouth, Aug.; Weston, W. Siddlescombe, Sussex, Jan.; Wethered, F. A. Antigua, Dec.; Whateley, T. Bedford, Nov.; Whimper, G. H. Tillingham, May; Whitcombe, P. Cleobury, Mortimer, Salop, May; Whitwell, F. Shrewsbury, Oct.; Wigg, W. S. Yarmouth, Mar.; Wilkinson, J. S. C. South Croxton, June; Williams, G. Tralee, May; Williams, J. Stoke Newington, Aug.; Williams, J. P. T., London, Mar.; Williams, W. W. London, May; Williams, W. Dolgelly, April; Williamson, J. East Indies, April; Willis, G. B. Cambridge, Aug.; Willson, G. London, Dec.; Wilson, G. Leeds, Mar.; Wilson, W. Altringham, May; Winchester, W. H. B. Army, Feb.; Wollaston, E. L. London, Mar.; Wood, J. Lambeth, April; Wood, W. London, Aug.; Wood, W. H. Ash Hall, Glam. Mar.: Wood, W. London, Mar.; Woodhouse, J. Westport, Mayo, July; Woods, T. Parsons Town, Kings Co. May; Wordsworth, J. Rydal, July; Wraith, J. H. Blackburn, Feb.; Wren, E. Eastwood, Essex, Nov.; Wright, A. Birmingham; Wyatt, G. R. London, July; Young, A. London, Mar.; Young, E. London, Nov.

SOCIETY OF APOTHECARIES OF LONDON.

Union-street, Blackfriars.—Chartered, 1616.

Master.—D. Clapton, Esq. *Wardens.*—J. Seaton, Esq.; Allen Williams, Esq. *Assistants.*—T. Wheeler, Esq.; J. Hurlock, Esq.: W. Rio Macdonald, Esq.; J. Hill, Esq.; J. Nussey, Esq.; W. King, Esq.; J. Hingeston, Esq.; G. Johnson, Esq.; E. A. Brande, Esq.; W. Malim, Esq.; H. Robinson, Esq.; J. Merriman, Esq.; J. W. Robins, Esq.; C. E. Clarke, Esq.; H. Blatch, Esq.; W. Bagster, Esq.; E. Wallace, Esq.; W. Payne, Esq.; J. Bacot, Esq.; S. Merriman, Esq.; W. Drew, Esq.

Court of Examiners.—*Chairman.*—H. C. Field; J. Ridout, F. L. S. and G.S.; R. H. King, T. L. Wheeler, H. Coombe, J. Hunter, J. B. Hill, E. Tegart, H. Morley, T. Ansell, A. M. Randall, C. Smith. *Secretary to the Court of Examiners*, R. B. Upton.

THE BOTANIC GARDEN.

Professor of Botany.—J. Lindley.

Superintending Chemical Operator and Professor of Chemistry and Materia Medica.—W.T. Brande.

Chemical Operator.—H. Hennell.

Also 126 Liverymen and 400 Yeomen.

Managers of the Botanic Garden.—D. Clapton, Esq.; J. Seaton, Esq.; A. Williams, Esq., F.L.S.; J. Hurlock, Esq., F.L.S.; W. Rio Macdonald, Esq.; J. Hill, Esq.; J. Nussey, Esq.; W. King, Esq.; J. Hingeston, Esq.; G. Johnson, Esq.; E. A. Brande, Esq.; Mr. N. B. Ward, F. L. S.

Clerk to the Society.—Mr. R. B. Upton.

Professor of Botany.—J. Lindley, Esq.; Ph., D., F.R.S., G.S., &c.

Superintending Chemical Operator, and Professor of Chemistry and Materia Medica.—W. T. Brande, Esq.; F.R.S. Lond. and Edin.

Chemical Operator.—Mr. Henry Hennell, F.R.S.

Accomptants. —Mr. J. Thomas, Mr. Thomas Tingle, F.L.S.

Principal Gardener.—Mr. William Anderson, F.L.S.

Every candidate for a Certificate to practise as an Apothecary, must produce testimonials of having served an apprenticeship of not less than five years to an Apothecary: of having attained the age of twenty-one: and of good moral conduct.

Students whose attendance on lectures commenced on or after the 1st of Oct., 1835, are required to produce proof of having attended, during three Winter and two Summer Sessions, lectures in the following order, and Medical Practice from the commencement of the second, to the termination of the third Winter Session.

Gentlemen whose indentures of apprenticeship bear date prior to Oct. 1st, 1835, and who can adduce satisfactory proof that they have not been permitted to commence attendance upon the Medical classes during their apprenticeship, will be allowed to complete their studies in conformity with the Regulations of Jan. 1835.

The Winter Medical Session commences Oct. 1st, and terminates in the middle of April, with a recess of fourteen days at Christmas: the Summer Session commences May the 1st, and ends July 31st.

First Winter Session. — Chemistry; Anatomy and Physiology; Anatomical Demonstrations; Materia Medica and Therapeutics.

First Summer Session.—Botany; and such other branches of study as may improve the student's general education.

Second Winter Session.—Anatomy and Physiology; Anatomical Demonstrations; Dissections; Principles and Practice of Medicine; Medical Practice of an Hospital.

Second Summer Session.—Botany, if not attended during the First Summer Session; Forensic Medicine; Medical Practice of an Hospital.

Third Winter Session.—Dissections; Principles and Practice of Medicine; Medical Practice of an Hospital or Dispensary.

MIDWIFERY.

The Student is required to attend, in separate Sessions, two Courses of Lectures on Midwifery and Diseases of Women and Children, each Course to consist of Sixty Lectures, including Examinations; these Lectures may be attended *at any time* subsequent to the termination of the First Summer Session; Practical Midwifery is also required, and may be attended *at any period* subsequent to the termination of the Second Winter Session.

The Student is required to attend the Medical Practice of a recognised Hospital, from the commencement of the Second Winter to the termination of the Second Summer Session, and from that time to the end of the Third Winter Session, the medical practice of an Hospital, or recognised Dispensary.

The sessional course of instruction in each respective subject of study, is to consist of not less than the following number of Lectures, viz.:

One hundred on Chemistry.

One hundred on Materia Medica and Therapeutics.

One hundred on the Principles and Practice of Medicine.

Sixty on Midwifery, and Diseases of Women and Children.

Fifty on Forensic Medicine.

Fifty on Botany.

The number of Lectures on Anatomy and Physiology, and of Anatomical Demonstrations, must be in conformity with the regulations of the Royal College of Surgeons of London, on these subjects.

The Lectures required in each course respectively, must be given on separate days. An examination of an hour's duration will be deemed as equivalent to a Lecture.

Students, when they present themselves for examination, must bring testimonials of having received instruction in Practical Chemistry during their attendance upon the Lectures on Chemistry, Materia Medica, or Forensic Medicine: and also of having attended a full course of Clinical Lectures, and such instruction in Morbid Anatomy, as may be afforded them during their attendance at an Hospital.

Every Student will be required to bring a testimonial of having dissected the whole of the body once at least.

The other regulations remain the same as in the almanack of 1837.

Names of Gentlemen having the care of the Registers.

Bath. — R. T. Gore, Lecturer on Anatomy. *Birmingham.* —W. Sands Cox, Lecturer on Anatomy.

Bristol.—Dr. Wallis; Hen. Clark; Lecturers on Anatomy. *Hull.*—E. Wallis; R. Craven; Lecturers on Anatomy. *Leeds.*—T. Pridgen Teale, Lecturer on Anatomy. *Liverpool.*—Dr. Malins, Lecturer on Medical Jurisprudence. *Manchester.*—T. Turner; T. Fawdington; Lecturers on Anatomy. *Newcastle.*—W. Morrison, Lecturer on Anatomy. *Sheffield.* — W. Jackson, Lecturer on Anatomy. *York.*—J. Hopps, Lecturer on Anatomy.

Each Student at his first registration will receive the printed form on which he is to obtain the certificates of his Teachers.

REGISTRATION.

All Students, in London, are required to appear personally, and to register the several classes for which they have taken Tickets; and those only will be considered to have complied with the regulations of the Court whose names and classes in the register correspond with the testimonials of the Teachers.

The book will be open for registration in the months of October and May: and for the registration of certificates of having *duly attended* such Lectures or Medical Practice, in the months of April and July.

The Court also require Students at the Provincial Medical Schools to register their names in their own hand-writing, in the order above stated, with the Registrar of each respective school.

PRELIMINARY EXAMINATION.

Students may undergo their Latin Examination subsequently to their first registration. It consists in translating passages from the four first books of Celsus; and the first twenty chapters of Gregory's Conspectus Medicinæ.

LONDON MEDICAL AND SCIENTIFIC SOCIETIES.

MEDICAL SOCIETIES.

THE ROYAL MEDICAL AND CHIRURGICAL SOCIETY.

—53, BERNERS-STREET. —*Instituted* 1805.—*Chartered* 1834.

Officers and other Members of the Council for the year 1838-39.

President.—Richard Bright, M.D., F.R.S.

Vice-Presidents. — R. Williams, M.D., J. Copland, M.D., F.R.S.; E. A. Lloyd, Esq.; C. H. Hawkins, Esq.

Treasurers.—S. Merriman, M.D.; J. M. Arnott, Esq.

Secretaries.——J. Clendinning, M.D.; J. G. Perry, Esq.

Librarians.—R. Willis, M. D.; S. Solly, Esq., F.R.S.

Ordinary Members of Council.—R. Partridge, Esq., F.R.S.; H. Lee, M.D.; J. Moore, M.D.; T. Davis, Esq.; J. F. Palmer, Esq.; S. Smith, M.D.; W. Money, Esq.; A. R. Sutherland, M.D., F.R.S.; G. F. D. Evans, M.D.; R. Quain, Esq.

Assistant Librarian.—Mr. Williams.

Members admitted by ballot, pay an admission fee of six guineas; and three guineas annually. Members who reside more than seven miles from London pay no annual subscription. Twenty-one volumes of Transactions have appeared, to which the resident fellows are entitled.

THE MEDICAL SOCIETY OF LONDON.—3, BOLT-COURT, FLEET-STREET. — *Instituted* 1773.

Officers and Council for 1838-39.

President.—T. E. Bryant, Esq.

Vice-Presidents.—Leonard Stewart, M. D.; J. Whiting, M. D.; G. Pilcher, Esq.; Edw. Headland, Esq.

Treasurer.—W. Shearman, M.D.

Librarian.—W. C. Dendy, Esq.

Secretaries.—H. P. Robarts, Esq.; J. R. Bennett, M.D.

Secretary for Foreign Correspondence.—T. Davidson, M.D.

Council.—W. Kingdon; N. Clifton; J. S. Bristow; J. Cole; E. Crisp; N. Delph; E. Doubleday; W. B. Diamond; W. Eales; J. Howell; F. Hutchinson; J. Leach; E. Leese; E. H. Linnecar; E. Meryon; R. Parry; S. Proctor; H. Sidden; J. Smith; H. Statham.

To Deliver the Oration in March, 1839, T. E. Bryant, Esq.

Questions for the Fothergillian Medal.

For March, 1839.—"On the Use and Abuse of Mercury."

For March, 1840.—"On Bronchitis."

Registrar.—C. Severn, M.D.

Subscription, two guineas per annum. Library contains 15,000 volumes.

WESTMINSTER MEDICAL SOCIETY.—*Instituted* 1809.

Officers for 1838-39.

Presidents,—Mr. F. H. Thomson, Dr. Chowne.

Vice-Presidents.—Mr. Streeter, Mr. King.

Committee.—Messrs. Brunskill, C. Chowne, J. F. Clarke, Hawkins, Lambert, Marson; Drs. Roscoe, Reid; Mr. G. Smith.

Secretaries. — Mr. Chance, Mr. Hardwicke.

Treasurer.—Mr. Millington.

The ordinary meetings of the Society are held at the Hunterian Theatre of Anatomy, Great Windmill-street. Admission, one guinea, perpetual.

HUNTERIAN SOCIETY.—4, BLOMFIELD-STREET, FINSBURY. *Instituted* 1819.

Officers for 1838-39.

President.—J. Whiting, M.D.

Vice-Presidents.—J. Adams, Esq.; G. H. Barlow, M.D.; R. Bright, M.D., F.R.S.; C. Law, Esq.

Treasurer.—B. G. Babington, M.D., F.R.S.

For the Oration, W. Cooke, Esq.

Librarian.—T. Bull, M.D.

Secretaries.—W. Cooke, Esq.; H. M. Hughes, M.D.

Council.—M. Beale, Esq.; F. W. Bossy, Esq.; B. B. Cooper, Esq., F.R.S.; R. Dickson, M. D.; H. Greenwood, Esq.; J. C. W. Lever, Esq.; F. B. Lloyd, Esq.; J. Miles, Esq.; J. Roberts, Esq.; E. Smith, Esq.; S. Solly, Esq., F.R.S.; A. Tweedie, Esq.

HARVEIAN SOCIETY. — 17, EDWARD-STREET, PORTMAN-SQUARE.—*Instituted* 1831.

Officers for 1838-39.

Presidents.—W. M‘Intyre, M.D. ; G. J. Squibb, Esq.

Honorary Secretary.—A. Anderson, Esq., M.A.

Treasurer.—W. Stroud, M.D.

Council.—E. Harrison, M.D. ; W. Ley, Esq. ; W. Maclure, Esq. ; J. Lilburn, M.D. ; E. Barker, Esq. ; J. Humphage, Esq.

PHYSICAL SOCIETY.—GUY'S HOSPITAL.—*Instituted* 1772.

Officers for 1838-39.

Hon. President.—Sir A. Cooper, Bt.

Presidents. — Dr. Addison, Dr. Hughes, Dr. Guy, Mr. Key, Mr. Cock, Mr. Chapman.

Honorary Secretaries.—Dr. G. O. Rees, and Mr. Tweedie.

MEDICO-BOTANICAL SOCIETY OF LONDON.—32, SACKVILLE-STREET.—*Instituted* 1821.

Officers for 1838-39.

President.—Earl Stanhope.

Treasurer.—H. Cope, Esq., jun.

Secretaries.—W. H. Judd, Esq. ; E. Saunders, Esq.

Librarian.—J. Hancock, M.D.

Conservator.—F. J. Farre, M.D.

Professor of Botany.—C. Johnson, Esq.

Professor of Chemistry.—T. Everitt, Esq.

Professor of Materia Medica.—G. Sigmond, M.D.

Professor of Toxicology.—W. T. Iliff, Esq.

SCIENTIFIC SOCIETIES.

ROYAL SOCIETY.

SOMERSET HOUSE.

Officers for 1838-39.

President.—Vacant.

Treasurer.—J. W. Lubbock, Esq.

Secretaries—P. M. Roget, M. D. ; J. G. Children, Esq.

Foreign Secretary.—C. Kónig, Esq.

Assistant Secretary.—J. D. Roberton, Esq.

Librarian.—W. E. Shuckard.

Council.— *George Biddell Airy, Esq. ; W. Allen, Esq. ; *John Bostock, M. D. ; *Earl of Burlington ; Samuel Hunter Christie, Esq. ; *Viscount Cole, M.P. ; J. H. Green, Esq. ; *G. B. Greenhough, Esq. ; W. Lawrence, Esq. *John Lindley, P.L.D. ; W. Lubbock, Esq., M.A. ; Rev. G. Peacock, M. A. ; *Wm. Hasledine Pepys, Esq. ; *Rev. A. Sedgwick ; W. H. Smith, Capt. R. N. ; *W. H. F. Talbot, Esq.

The names marked * were not members of the last Council.

ROYAL INSTITUTION OF GREAT BRITAIN. — ALBEMARLE-STREET.

Officers for 1838-39.

President—The Duke of Somerset.

Treasurer.—W. R. Hamilton, Esq., F.R.S.

Secretary.—E. R. Daniel, Esq. F.R.S.

Librarian.—Mr. W. Mason.

Professor of Chemistry.—Wm. T. Brande, Esq., F.R.S.L. and E., &c.

Professor of Natural and Experimental Philosophy.—

Professor of Botany.—John Lindley, Esq., Ph.D., F.R.S., F.L.S., &c., &c., &c.

Fullerian Professor of Chemistry, and Director of the Laboratory. —M. Faraday, Esq., D.C.L., F.R.S.

Fullerian Professor of Physiology. —R. E. Grant.

Assistant in the Laboratory.—Mr. C. Anderson.

Assistant Secretary.—J. Fincher, Esq.

[*Regulations same as last year.*]

SOCIETY OF ARTS.—18, JOHN-STREET, ADELPHI.—*Instituted* 1754, *for the Encouragement of Arts, Manufactures, and Commerce.*

Officers for 1838-39.

President.—The Duke of Sussex.

Secretary.—A. Aikin, Esq.

Assistant Secretary.—Mr. Thos. Woodfall.

STATISTICAL SOCIETY OF LONDON.—4, ST. MARTIN'S PLACE.—*Founded March 15th,* 1834.

Officers for 1838-39.

President.—Earl Fitzwilliam.

Vice-Presidents.—Right Hon. S. Bourne, F.R.S.; Sir C. Lemon, Bart., M.P.; Lord Sandon, M.P.; Colonel Sykes.

Honorary Secretaries.—W. Greig, F.R.S.; C. H. Maclean; R. W. Rawson.

Assistant-Secretary.—R. W. Deverell.

Collector.—Mr. N. Hill.

There are upwards of four hundred Fellows. They are admitted by ballot, and must have three-fourths of the votes in their favour. The Annual Subscription is two guineas, due on the 1st of January. Fellows may compound for future payments, at any time, by paying twenty guineas. A Library of Statistical works is forming. The Society publishes a Monthly Journal.

GEOLOGICAL SOCIETY.

SOMERSET HOUSE.

Instituted 1807.——*Incorporated* 1826.

Officers for 1838-39.

President.—Rev. W. Whewell, M.A., F.R.S.

Vice-Presidents.—W. H. Fitton, M.D., F.R.S., and L.S.; C. Lyell, jun., F.R.S., and L. S.; R. I. Murchison, Esq., F.R.S., and L.S.; Rev. A. Sedgwick, F.R.S., and L.S.

Secretaries.—C. Darwin, Esq.; W. J. Hamilton, Esq.

Foreign Secretary.—H. T. De la Beche, Esq., F.R.S., and L.S.

Treasurer.—J. Taylor, Esq., F.R.S., and L.S.

Persons living within twenty miles of London may become members by paying an admission fee of six guineas, and three guineas annually; or thirty guineas in lieu of annual payment. Persons living at a greater distance from London than twenty miles make one payment of 10*l.* 10*s.*

The Society publishes Transactions. It possesses a good library, and a museum of Mineralogical and Fossil remains.

ZOOLOGICAL SOCIETY.

28, LEICESTER-SQUARE.

Instituted, 1826, for the advancement of Zoology, and the introduction and exhibition of subjects of the animal kingdom, alive, or in a state of preservation.

Officers for 1838-39.

President.—Earl of Derby.

Vice-Presidents.—T. Bell, F.R.S.; Lord Braybrooke; Sir J. P. Bolieau; Captain Bowles, R.N.; B.B. Cabbell, F.R.S.

Treasurer.—C. Drummond.

Secretary.—J. Barlow.

Members are admitted by ballot; pay an admission fee of 5*l.*, and 3*l.* annual payment; or 35*l.* in lieu of annual payments.

The Society has a library, an extensive museum, and public gardens, and publishes Transactions, and a Report is also published of the proceedings, state of the funds, &c., &c.

LINNEAN SOCIETY.

SOHO-SQUARE.

Officers for 1838-39.

President.—Bishop of Norwich.

Vice-Presidents.—R. Brown; E. Forster, F.R.S.; E. Forster, jun.

Secretary.—F. Boot, M.D.

Treasurer. — E. Forster, Esq., F.R.S.

The Society possesses an excellent library and museum, which are open to members: the former on Monday, Tuesday, and Thursday; the latter on Wednesday and Friday, until four o'clock in the afternoon. The Society publishes Transactions.

HORTICULTURAL SOCIETY OF LONDON.—REGENT-ST.—

Incorporated 1808.

Officers for 1838-39.

President.—Duke of Devonshire.

Vice-Presidents. — E. Barnard, Esq.; H. M. Dyer, Esq.; A. Henderson, M.D.; G. Loddiges, Esq.

Treasurer.—T. Edgar, Esq.

Secretary.—E. Bentham, Esq.

Assistant-Secretary.—J. Lindley, D. Ph.

Gardener.—Mr. D. Munro.

The fee to be paid on the election and admission of a new Fellow is six guineas, and four guineas per annum, payable on the 1st of May, which may be compounded for, by the payment of forty guineas at any one time, before the contribution of the current year becomes due. Nine volumes of Transactions are published.

PHRENOLOGICAL SOCIETY.

1838-39.

President.—John Elliotson, M.D., F.R.S.

Vice-Presidents.—J. Moore, M.D., J. I. Hawkins, Esq.; Professor C. Wheatstone, F.R.S.; T. R. Fearnside, Esq.

Treasurer.—J. B. Sedgwick, Esq.

Secretary.—E. S. Symes, Esq.

Librarian.—W. J. E. Wilson, Esq.

Curator.—W. Herring, Esq.

Anniversary 31st of January. There are between seventy and eighty members. Admission fee, one guinea; annual subscription, a guinea. There are a small library, and several hundred casts of heads and skulls; and forty or fifty real skulls.

BRITISH ASSOCIATION FOR THE ADVANCEMENT OF SCIENCE.—1830.

Officers for 1838-39.

President.—Rev. Vernon Harcourt.

Vice-Presidents.—Marquis of Northampton; Earl of Dartmouth; Rev. Dr. Robinson; J. Corrie.

General Secretaries. — Messrs. Yates, Murchison, and G. Peacock.

Assistant - General - Secretary. — Professor Phillips.

Local Secretaries.—Messrs. Barker, Hodson, Ossler, and Dr. Blackstone.

Treasurers.—Messrs. Taylor, Moylatt, and J. Russell.

Council.—Duke of Northumberland; Earl of Burlington; Mr. Baily, Mr. Greenhough; Sir C. Lemon; Mr. Lyell; Colonel Sykes; Mr. Lubbock; Captain Washington; Major Sabine; Mr. R. Hutton; Dr. Arnott; Professor Whewell; Professor Graham; Rev. Dr. Buckland; Mr. Gray; Mr. Brown; Mr.

Owen; Sir J. Rennie; Dr. Lardner; Dr. Jenyns; Professor Wheatstone.

The last meeting was held at Newcastle-upon-Tyne. The next meeting will be held at Birmingham, in August, 1839.

METEOROLOGICALSOCIETY.

Officers for 1838-39.

President.—Dr. G. Birkbeck.

Secretary.—Mr. W. H. White.

Meets at the Mechanics' Institution, Southampton Buildings, the first Tuesday of each month, from November to June.

ENTOMOLOGICAL SOCIETY.

21, OLD BOND-STREET.

Officers for 1838-39.

President.—F. Stephens, Esq.

Treasurer.—W. Yarrell, Esq.

Secretary.—J. O. Westwood, Esq.

Meets the first Monday in every month.

ROYAL BOTANIC SOCIETY OF LONDON.

11, PARLIAMENT-STREET.

Officers for 1838-39.

President.—The Duke of Richmond.

Secretaries.—J. D. C. Sowerby, Esq., F.L.S.; P. E. Barnes, Esq.

Among the *Council* are the names of Sir Astley Cooper; Professor Don; Doctors Sigmond, Farre, Macreight, and Addison, and T. J. Pettigrew, Esq.

The objects of this Society are the formation of an extensive Botanic Garden, in the Inner Circle of the Regent's Park, and of a Library, Museum, and Conservatories; so that Medical and Scientific, as well as merely Ornamental Botany, will respectively receive the attention commensurate with their importance. Public Exhibitions and Lectures will be given during the summer. Admission fee, five guineas; annual subscription, to commence in January, 1839, two guineas.

BOTANICAL SOCIETY OF LONDON.—75, NEWMAN-ST., OXFORD-STREET.

Officers for 1838-39.

President.—J. E. Gray, Esq., F.R.S.

Vice-Presidents.—Dr. Macreight, F.L.S.; C. Johnson, Esq.

Curator.—Daniel Cooper, Esq., A.L.S.

Secretary.—G. E. Dennes, Esq.

METROPOLITAN SOCIETY OF FLORISTS AND AMATEURS.

Officers for 1838-39.

President.—The Earl of Errol.

Treasurer.—John Goldham, Esq.

Secretary.—G. Glenny, Esq.

Assistant-Secretary.—Mr. Robert Mears.

Meets at the Crown and Anchor Tavern, the first and third Wednesdays in every month.

BRITISH MEDICAL ASSOCIATION, EXETER HALL.

Officers and Council for 1838-39.

President.—George Webster, Esq., M.D., M.R.C.S. Ed.

Vice-Presidents.—M. Hall, M.D., F.R.S. L. & Ed.; A. B. Granville, M.D., F.R.S., &c.; R. Davidson, Esq.; G. Pilcher, Esq.; M. Wm. Hilles, Esq.; J. Howell, Esq.

Honorary Secretaries. — M. F. Wagstaffe, Esq.; C. H. R. Harrison, Esq.

Treasurer.—E. Evans, Esq.

Other Members of Council.—J. N. Bainbridge, Esq.; T. J. Bayfield, Esq.; J. M. Beane, Esq.; C. Brady, Esq.; J. S. Bristowe, Esq.; J. Clarke, Esq.; E. Crisp, Esq.; N. Delph, Esq.; Wm. Eales, Esq.; Wm. Farr, Esq.; Professor Grant, M.D., F.R.S. Ed., &c.; P. H. Green, M.D., &c.; Wm. Herring, Esq.; R. L. Hooper, Esq.; Wm. Hughes, Esq.; G. Hull, M.D., M.R.C.S. Ed.; L. J. I'on, Esq.; C. G. Ireland, Esq.; J. Lavies, Esq.; R. Liston, Esq.; D. M'Ewan, M.D., &c.; Geo. Parsons, Esq.; T. Porter, Esq.; Sam. Procter, Esq.; Rich. Smales, Esq.; T. Wakley, Esq.

Honorary Solicitor.—D. Davies, Esq.

Collector.—Mr. G. Dowie.

BENEVOLENT SOCIETIES.

SOCIETY FOR THE RELIEF OF WIDOWS AND ORPHANS OF MEDICAL MEN IN LONDON AND ITS VICINITY.—*Instituted*, 1788.

Report not forwarded by Secretary.

MEDICAL BENEVOLENT SOCIETY.—*Instituted* 1816.

Patron.—The Duke of Sussex.

President.—J. Latham, M.D.

Vice-Presidents.—J. Hull, M.D.; Sir H. Halford, Bart.; Sir M. T. Tierney, Bart.; Sir A. P. Cooper, Bart.; J. P. Vincent, Esq.; Robert Keate, Esq.; E. A. Brande, Esq.; J. Nussey, Esq.; E. Bean, Esq.

Directors.—H. Holland, M.D.; H. Roots, M.D.; Sir C. M. Clarke, Bart.; W. F. Chambers, M.D.; G. M. Burrows, M.D.; J. Warburton, M.D.; R. Blagden, Esq.; T. Bell, Esq.; T. Copeland, Esq.; R. R. Pennington, Esq.; H. Alexander, Esq.; J. Freeman, Esq.; R. James, Esq.; J. H. Pope, Esq.; M. Tupper, Esq.; T. Hammerton, Esq.; G. Fincham, Esq.

Trustees.—J. Latham, M.D.; J. Bayford, Esq.; R. Ogle, Esq.; Sir C. M. Clarke, Bart.

Treasurers. — H. Clutterbuck, M.D., New Bridge-street; H. Field, Esq.; R. Ogle, Esq.

Secretary.—Mr. W. Malim, jun., Southampton-row, Russell-sq.

Collector.—Mr. F. Wilson, Knight Rider-street, Doctors' Commons.

Bankers.—Messrs. Childs, Temple-Bar.

The Society has now £7400 in the three per cent. Bank Annuities. Last year it had a munificent benefaction from B. B. Cabell, Esq., of £100. The terms of admission are one guinea paid down: and one guinea per annum in advance; or twenty guineas at one payment. There are 201 members. In the year, April 1836-7, receipts £495; expenditure, £25 applied to the relief of a member, £41 in other expenses.

This Society was established in the year 1816, for the purpose of affording relief to such of its members "as are in distressed circumstances, from mental or bodily infirmity, or who, from other causes, shall be considered as requiring and deserving of assistance."

THE ARMY MEDICAL OFFICERS' BENEVOLENT SOCIETY.—ARMY MEDICAL BOARD-OFFICE. — *Instituted*, *May*, 1820.

President. — Sir C. Ker, M.D., Principal Inspector-General of the Army Medical Department.

Vice-Presidents.—Dr. Renny, Director-General in Ireland; Sir C. M. Clarke, Bart.; T. Gordon, Esq., Principal Inspector-General.

The Anniversary Meeting is held at the Thatched House Tavern, St. James's-street, on the 20th of May.

THE ASSURANCE SOCIETY OF THE OFFICERS OF THE MEDICAL DEPARTMENT OF THE ARMY.—*Instituted* 1816.

President.—Sir J. M'Grigor, Bart.

Vice-Presidents.—Sir M. Tierney, Bart.; Sir C. Ker, M.D.; W. Somerville, M.D.

Secretary.—Mr. T. Tanner.

The Anniversary Meeting is held at the Thatched House Tavern, St. James's-street, on the 20th of May.

ARMY MEDICAL BOARD,

13, ST. JAMES'S-PLACE.

Director-General.—Sir J. M'Grigor, Bart., M.D., F.R.S., K.T.S., Physician Extraordinary to the Queen. *Deputy Inspector General of Hospitals.*—T. Gordon, M.D. *Agent.* — J. Kirkland, Esq.

MEDICAL DEPARTMENT OF THE ARMY.

The name of no gentleman can be placed on the list who does not possess the diploma of either of the Colleges of Surgeons of London, Edinburgh, or Dublin, and who cannot produce the following testimonials:—

18 Months' attendance on an hospital of celebrity, where the average number of in-patients is not less than 80.
24 ——— Anatomy.
12 ——— Practical Anatomy.
12 ——— Surgery, or (what is preferred) 6 months' Surgery, and 6 months' Military Surgery.
6 ——— Clinical Surgery, a complete course of two or three Lectures during the week.
12 Months' Practice of Physic, or 6 months' practice of Physic, and 6 of general Pathology.
6 Months' Clinical Lectures on ditto, the same as required in Surgery.
12 ——— Chemistry.
6 ——— Practical Chemistry.
3 ——— Botany.
3 ——— Materia Medica.
3 ——— Practical Pharmacy or Apprenticeship.
4 ——— Natural History.
4 ——— Midwifery.

2nd. The candidates must be unmarried, not beyond twenty-six years of age, nor under twenty-one years.

3rd. Candidates who have had an University education, and who have the degree of A.M. as well as that of M.D., will be preferred; but a liberal education, and a competent knowledge of the Greek and Latin languages are indispensably requisite in every candidate.

4th. Although the British schools are specified, it is to be understood that candidates who have received a regular education in approved foreign universities or schools will be admitted to examination.

ARMY MEDICAL OFFICERS.

RANKS.	Rates of Daily Pay subject to certain Provisions.											
	After 25 years' actual Service.			After 20, but under 25 years' actual Service.			After 10, but under 20 years' actual Service.			Under 10 years' actual Service.		
	£	s.	d.	£	s.	d.	£	s.	d.	£	s.	d.
Assistant Surgeon	0	10	0	0	10	0	0	10	0	0	7	6
Regimental Surgeon	1	2	0	0	19	0	0	15	0	0	13	0
Staff Surgeon	1	3	0	1	0	0	0	16	0	0	14	0
Assistant Inspector of Hospitals	1	4	0	1	2	0	0	19	0	0	0	0
Deputy Inspector General of ditto	1	10	0	1	8	0	1	4	0	0	0	0
Inspector General of Hospitals	2	0	0	1	18	0	1	16	0	0	0	0

MEDICAL DEPARTMENT OF THE NAVY,

ADMIRALTY, SOMERSET HOUSE.

Physician-General of the Navy.—Sir W. Burnett, K.C.H. *Chief Clerk.*—J. Bynon, Esq.

ROYAL HOSPITAL, HASLAR.

Physician.—J. Richardson. *First Surgeon.*—J. Mortimer. *Second Surgeon and Lecturer.*— *Junior Surgeon and Medical Storekeeper.*—W. Martin (B.) *Agent and Steward.*—J. C. Weir.

ROYAL HOSPITAL, PLYMOUTH.

Physician.—Sir D. J. H. Dickson. *Surgeon.*—R. Armstrong. *Junior Surgeon and Medical Storekeeper.*—J. Crocket. *Agent and Steward.*—T. Grant.

ROYAL MARINE INFIRMARIES AND NAVAL HOSPITALS.

Chatham. *Surgeon.*—W. Rae. *Purveyor.*—G. Hookey.

Woolwich. *Surgeon.*—H. Parkin. *Purveyor.*—Capt. G. Varlo.

ROYAL MARINE INFIRMARIES.

Portsmouth. *Surgeon.*—D. Quarrier.

Plymouth. *Surgeon.*—I. Ryall.

Number of Surgeons on the Navy List, 680. Assistant-Surgeons ditto, 282.—(1837.)

CONDITIONS OF ENTERING THE NAVY.

See Almanack 1837, *page* 72.

By the Rules of the Service, no assistant surgeon can be promoted to the rank of surgeon, until he shall have served three years in the former capacity, one year of which must be in a ship actually employed at sea; and it is resolved that not any diploma or certificate of examination from either of the aforesaid Royal Colleges, shall be admitted towards the qualification for surgeon, unless the diploma or certificate shall be obtained on an examination passed after a period of not less than three years from the date of the party's admission into the Service; and whenever assistant surgeons already in the Service (whose professional education may not be in accordance with the above) obtain leave to study previously to their passing for surgeon, they will be required on their examination to produce testimonials of their having availed themselves of the period of leave to complete their education agreeably to these Regulations.

QUALIFICATIONS REQUIRED FOR ADMISSION AS ASSISTANT SURGEONS IN THE EAST INDIA COMPANY.

A certificate in proof of being twenty-two years of age.

A diploma from the College of Surgeons in London, Dublin, Glasgow, or Edinburgh.

An examination by the Company's Examining Physician, Dr. Hume, in Medicine, Anatomy, Physiology, &c.; he must also produce a certificate of 6 months' attendance to Physician's practice, in a hospital containing 100 beds at least. Other blank certificates, on a paper to be obtained by application, are required to be filled up; these relate to age, health, and one from the parent or guardian, and a nomination certificate.

OFFICE OF METROPOLITAN COMMISSIONERS IN LUNACY, No. 6, John-st., Adelphi, September, 3, 1838.

The Right Honourable the Lord High Chancellor of Great Britain has, under the authority of the Act 2d and 3d William 4th, cap. 107, appointed Lord Seymour; Lord Ashley; R. Gordon, Esq.; R. V. Smith, Esq.; J. Abel Smith, Esq.; Col. James Clitherow; Lieut. Col. W. H. Sykes; Lieut.-Col. E. Clive; Edmund Halswell, Esq.; Captain Jelt Sharpe; the Rev. Dr. George Shepherd; James William Mylne, Esq.; Bryan Waller Procter, Esq.; Dr. Thomas Turner; Dr. John Bright: Dr. Henry H. Southey; Dr. John Robert Hume; and Dr. Edward James Seymour; to be the Metropolitan Commissioners in Lunacy, during the space of one year, for licensing and visiting all houses within the jurisdiction of the said Commissioners, and for carrying into effect the several provisions of the said act.

By order, EDWARD DU BOIS,
Clerk and Treasurer.

HER MAJESTY'S MEDICAL ESTABLISHMENT.

Physicians in Ordinary. — Sir J. Clark, Bart., M.D.; Sir H. Halford, Bart, M.D.: W. F. Chambers, M.D.

Sergeant Surgeons.—Sir A. P. Cooper, Bart.; Sir B. C. Brodie, Bart.; R. Keate, Esq.

Physician to the Household.—Sir James Clark, Bart., M.D.

Surgeon to the Household. — J. Phillips, Esq.

Apothecary to the Person. — J. Nussey, Esq., and E. D. Moore, Esq., jointly.

Apothecary to the Household.—J. Nussey, Esq., and C. Cradock, Esq., jointly.

Physicians Extraordinary. — Sir J. M'Grigor, Bart., M.D.; H. Holland, M.D.; P. M. Latham, M.D.; R. Bright, M.D.; N. Arnott, M.D.

Surgeons Extraordinary.—B. Travers, Esq.; T. Copeland, Esq.; W. Lawrence, Esq.; R. Blagden, Esq.

Apothecaries Extraordinary. — Messrs. Merriman.

Time of Meeting of the Medical and other Societies, for 1838—9.

SOCIETIES.	Times of Meeting.	November.	December.	January.	February.	March. East. Sun. 31st.	April.	May. Whitsunday, 19th.	June.	ANNIVERSARY MEETING.
Royal Medic. Chirurgical, Berners-street.	P.M. Tues. 8½	13, 27	11	8, 22	12, 26	12, 26	9, 23	7, 21	....	....
London Medical, Bolt-court	Mond. 8	26	3, 10, 17, 23, 31	7, 14, 21, 28	4, 11, 18, 25	4, 11, 18, 25	1, 8, 15, 22, 29	6, 13, 20, 27	....	March 8
Westminster Medical, Hunterian Theatre.	Satur. 8	24	1, 8, 15, 22, 29	5, 12, 19, 26	2, 9, 16, 23	2, 9, 16, 23, 30	6, 13, 20, 27	....	....	....
Hunterian, Blomfield-st. Finsb.	Wed. 8	28	12, 26	16, 30	13, 27	13, 27	10, 24	8, 22	5, 19	February 6
Harveian, Edward-st. Portman-square	Satur. 8	3, 17	1, 15	5, 19	2, 16	2, 16	6, 20	4, 18	....	....
Medico-Botanical, Sackville-street	Wed. 8	14, 28	12	9, 16,* 23	13, 27	13	10, 24	8, 22	12, 26	January 16
Royal, Somers. House	Thur. 8½	15, 22, 30*	6, 13, 20	10, 17, 24, 31	7, 14, 21, 28	7, 14, 21	11, 18, 25	2, 9, 16, 30	6, 13, 20	Nov 30. 1 p.m.
Antiquaries, Somerset House	Thur. 8	15, 22, 29	6, 13, 20	10, 17, 24, 31	7, 14, 21, 28	7, 14, 21	11, 18, 23*	2, 9, 16, 30	6, 13, 20	Ap. 23. 8 p.m.
Linnean, Soho-square	Tues. 8	6, 20	4, 18	15	5, 19	5, 19	2, 16	7, 24*	4, 18	May 24. 1 p.m.
Horticultural, Regent-street.....	Tues. 3	6 at 2 P.M.	4 at 2 P.M.	15 at 2 P.M.	5, 19 at 2 P.M.	5, 19	2, 16	1,* 7, 21	4, 18	May 1. 1 p.m.
Zoological, Leicester-square.	Tues. 8½ Thurs. 3	13, 27 1	11, 25 6	8, 22 3	12, 26 7	12, 26 7	9, 23 4, 29*	14, 28 2	11, 25 6	Ap. 29. 1 p.m.
Electrical, Adelaide-st. Strand	Tuesday	6, 20	4, 18	1, 15	5, 19	5, 19	2, 16	7, 16,* 21	4, 18	May 16
Society of Arts, Adelphi............	Wed. 7½ IllusTu 8	7, 14, 21, 28 13	5, 12, 19 11	9, 16, 23, 30 8	6, 13, 20, 27 12	6, 13, 20, 27 12	3, 10, 17, 24 9	1, 8, 15, 22, 29 14	5, 12 11	....
Geological, Somerset House	Wed. 8½	7, 21	5, 19	9, 23	6, 15,* 27	13, 27	10, 24	8, 22	5	Feb. 15. 1 p.m.
London Institution, Finsbury-circus.....	Wed. 7	....	....	....	....	13, 27	10, 24, 25*	....	....	April 25
Royal Astronomical, Somerset House	Friday 8	9	14	11	8*	8	12	10	14	Feb. 8. 3 p.m.
Royal Institution, Albemarle-street ...	Frid. 8½	....	....	18, 25	1, 8, 15, 22	1, 8, 15, 22	12, 19, 26	1,* 3, 10, 17, 24, 31	7	May 1
Royal Geographical, Regent-street........	Mond. 9	12, 26	10	7, 21	11, 25	11, 25	8, 22	13, 20,* 27	10, 24	May 20. 1 p.m.
Entomological, Old Bond-street.....	Mond. 8	5	3	7, 28*	4	4	1	6	3	Jan. 28. 8 p.m.
Statistical, St. Martin's-place..	Mond. 8	19	17	21	18	15,* 18	15	20	17	Mar. 5. 3 p.m.

LONDON HOSPITALS.

Accidents, and cases of great emergency, are admitted at all times, without recommendation, into the London Hospitals. The days and hours of attendance are fixed by the medical officers themselves; some attend more, some less frequently, than is stated.

GENERAL HOSPITALS.

ST. BARTHOLOMEW'S HOSPITAL.—West Smithfield.—Founded by Henry VIII., 1539.

Physicians.—Hue, M. Th. S. at half-past 11; Latham, M. Tu. F. at half-past 8, A.M.; Roupell, M.W.F. at half-past 12. *Assistant Physicians.*—G. Burrows, F. Farre, Jeafferson; one attends daily to prescribe for out-patients. *Surgeons.* J. P. Vincent, Tu. T. S. at half-past 12; W. Lawrence, Stanley, M. W. F. at half-past 12. *Assistant Surgeons.*—E. A. Lloyd, F. G. Skey, J. F. Wormwald, at half-past 12.

St. Bartholomew's Hospital contains 540 beds; 365 are allotted to surgical cases, (of these 100 to venereal cases,) and 175 to medical cases.

Clinical Lectures are delivered during summer by Drs. Latham and Roupell, and Messrs. Lawrence and Stanley.

FEES.

Medical.—9 Months,	12 guineas	
18 ditto,	15 ditto	
Perpet......	31 ditto	
Surgical.—6 Months,	18 guineas	
12 ditto,	26 ditto	
Dressers.—6 Months,	36 guineas.	
12 ditto,	50 ditto	

ST. THOMAS'S HOSPITAL, Southwark.—Founded by Edward VI., 1553.

Physicians.—Williams, M. Th.; Roots, W.S.; Burton, Tu.F.; (hour of visiting 1 P.M.). Dr. Lister (*Assistant Physician*) sees out-patients Tu. and Th. at 11 A.M. *Surgeons.*—B. Travers, Tu. and F. at 9 A.M.; J. H. Green, W. and Sa. at 11 A.M.; F. Tyrrell, M. and Th. at 9 A.M. J.F. South (*Assistant Surgeon*) sees out-patients on M. and W. at 9 A.M. *Apothecary.*—R. Whitfield.

The admission day for patients is Tu. at 10 o'clock. There are 19 wards in the hospital; 12 surgical, 7 medical, or 250 surgical beds, and 200 medical. Post-mortem examinations are conducted by Dr. Barker, and there is a good museum, and a small library for the use of students attached to the hospital.

Days for operation, Friday, at 1 o'clock.

FEES.

Medical.—18 Months,	15 guineas.
Perpet.	23 ditto
Dressers.—6 Months,	30 guineas.
12 ditto,	£51 2
Surgical.—9 Months,	£20
21 ditto,	26 6

GUY'S HOSPITAL.—Founded 1721, at the sole charge of Thomas Guy, and during his lifetime.

Physicians.—R. Bright, M. Fr.; Addison, Tu. S.; Babington, M. Th. All attend at half-past 12. *Consulting Surgeon.*—Sir A. P. Cooper, Bart. *Surgeons.*—C. A. Key, M. Th.; J. Morgan, W. S.; and B. B. Cooper, Tu. F., at half-past 12; T. Callaway attends daily. *Apothecary.*—R. Stocker.

Admission day for patients, W. at 10 A.M. Surgeons, out-patients, at 11 Th.; Physicians, out-patients, F. 11. An Eye Infirmary is attached to the hospital, which is attended by Mr. Morgan, on M. and F. at 12. A lying-in charity, and a lunatic asylum, are connected with the hospital. There are an extensive museum of morbid and anatomical preparations, and of comparative anatomy; and wards devoted to clinical illustrations.

FEES.

Medical.—Perpet.	£24 4
18 Months,	15 guineas.
Surgical.—6 Months,	£20
18 ditto,	26 6
Dressers.—6 Months,	£32 2
12 ditto,	51 2

WESTMINSTER HOSPITAL — Broad Sanctuary, opposite the Abbey.—Founded, 1719. Incorporated 1836.

Physicians.—J. Bright, Tu. Fri.; Roe, W. S.; Burne, M. and S. *Assistant Physician.*—Basham, daily. *Surgeons.*—Sir A. Carlisle, Tu. S.; White, M. S.; G. J. Guthrie, Th. S.; W. B. Lynn, Tu. W. F. Sat. *Assistant Surgeon.*—F. Hale Thomson, Tu. and Fri. *Apothecary.*—

House Surgeons are chosen from the dressers by the surgeons on paying a fee of 105*l.* Students may become dressers and clinical clerks gratuitously for a short time.

Clinical lectures are given occasionally.

FEES.

Medical.—	6 Months,	10 guineas.
	12 ditto,	12 guineas.
	18 ditto,	15 guineas.
	Perpet.......	20 guineas.
Surgical.—	6 Months,	12 guineas.
	12 ditto,	20 guineas.
	Perpet.......	30 guineas.

ST. GEORGE'S HOSPITAL, Hyde Park Corner.—Instituted, 1733.—Incorporated, 1834.

Physicians.—W. F. Chambers, J. Wilson, M. W. and F.; E. J. Seymour, and R. Macleod, Tu. Th. and S.; all at half-past 12. *Assistant Physician.*—J. Hope; attends daily. *Surgeons.*—R. Keate, and Sir B. C. Brodie, Bart. M. W. and F.; C. Hawkins, and G. G. Babington, Tu. Th. and S.; all at half-past 12 o'clock. *Assistant Surgeons.*—R. B. Walker, and E. Cutler, daily. *Apothecary.*—Hammerton.

In-patients are admitted on W. at half-past 12. Operation day, Th. at 1 o'clock. Clinical clerks and surgeons' dressers may be obtained gratuitously. The house surgeons are elected from dressers, who are properly qualified for the duties.

Clinical Lectures are given by several of the surgeons and physicians.

FEES.

Medical.—	18 Months,	16 guineas.
	Perpet.......	24 guineas.
Surgical.—	6 Months,	15 guineas.
	12 ditto,	20 guineas.
	Perpet.......	50 guineas.

Pupils who have paid for attending Medical practice for six months, are allowed at the end of that time to attend the practice of Surgeons for one year, by paying 16 guineas more.

LONDON HOSPITAL, Whitechapel-road. Instituted, 1746.

Physicians.—Frampton, M. Th.; A. Billing, W. and Fri.; Gordon, W. and S.; at 12 o'clock. *Assistant Physicians.*—Cobb, Davies, A. Frampton. *Surgeons.*—J. Scott, Tu. and F.; J. Luke, W. and S.; J. G. Andrews, M. and Th.; at 12 o'clock. *Assistant Surgeons.*—T. B. Curling, J. Adams, A. Hamilton; who see out-patients daily. *Apothecary.*—Boyrenson.

Clinical Lectures are given. Mr. Curling lectures on Morbid Anatomy.

Admission day for in-patients, Tu. 11 o'clock.

The operating day at the London Hospital is Tuesday, at 1 P.M. The post mortem examinations take place daily at 2 P.M. and are superintended by Mr. Curling. The museum of the hospital contains between 2000 and 3000 preparations. It is rich in morbid anatomy.

FEES—PRACTICE.

Medical.—	12 Months,	10 guineas
	Perpet.	20 ditto
Apothecary.—		1 guinea
Surgical.—	12 Months,	20 guineas
	Ditto, Dressing Pupil,	30 ditto
	6 ditto,	20 ditto

MIDDLESEX HOSPITAL, Berners-street.—1745. Enlarged, 1834.

Physicians.—Watson, M. W. and F.; Wilson, the same days; and F. Hawkins, Tu. Th. Sa. Each physician visits at 12 o'clock. *Physician Accoucheur.*—Sweatman. *Surgeons.*—H. Mayo, W. and Sa.; J.N. Arnott, M. and Th.; E.W. Tuson, Tu. and F. *Assistant Surgeon.*—Shaw. *House Surgeon.*—Rogers.—*Apothecary.*—Corfe.

In-patients are admitted at twelve o'clock on Tuesdays. Clinical Lectures are given (occasionally) on Saturdays. The house-surgeons are elected from the dressers. Operation day, Friday.

1837, Patients, 6249; out, 4444. In 1805, receipts £6124.

FEES.

Medical.—	3 Months,	6 guineas
	6 ditto,	10 ditto
	18 ditto,	15 ditto
	Perpet.	21 ditto
Surgical.—	3 Months,	10 guineas
	6 ditto,	15 ditto
	12 ditto,	20 ditto
Dressers.—	6 Months,	20 guineas
	12 ditto,	30 ditto

UNIVERSITY COLLEGE HOSPITAL, late NORTH LONDON HOSPITAL, Gower-street.

Physicians.—J. Elliotson, Tu. Th. S. from 2 to 3; A. T. Thomson, M. W. F. 1 to 2 p.m.; R. Carswell (out-patients) Tu. Th. and Sa. at 12; Davis (*Obstetric Physician*) out-patients, M. W. F. at 12. *Surgeons.*—S. Cooper, Tu. Th. Sa. from 1 to 2 p.m.; R. Liston, M. W. F. from 2 to 3 p.m.; R. Quain (out-patients) daily at 9. Patients with diseases of the eye attend Mr. Quain, W. at 12. *Apothecary.*—J. Taylor. *House Surgeons.*

No fixed operation day.

Clinical lectures are delivered by Dr. Elliotson, every Th. at 2; on Wed. by Dr. Thomson, at 1. Mr. Cooper and Mr. Liston, when notice is given, generally once a week. Admission day for in-patients, Tuesday at half-past 11 o'clock. The hospital contains 130 beds. 1837, total cases, 15,444. In-patients, 1270; out-patients, 3000; lying-in women attended at their own habitation, 324; casualties, 10,850; deaths from disease, 114; from accidents, 29. Average number of in-patients on the books, 121. In-patients now, 128. Receipts, £4968. Balance in Treasurer's hands, £175.

CHARING CROSS HOSPITAL, King William-street, Charing-cross. 150 beds. —Built 1831. Founded 1818.

Physicians.—Golding, Shearman, Chowne *Surgeons.*—J. Howship, R. Partridge. *Apothecary.*—Mr. Monteath.

The physicians and surgeons attend daily at 12 o'clock. Admission day for in-patients, Mon. at half-past 11 o'clock. Out-patients are seen daily.

1837, in-patients, 1209; out-patients, 4548; accidents, &c., 1093; making a total of 5757. Of these 108 died in the hospital, and 34 deaths were reported among the out-patients. Cost for 1837, £2231.

HOSPITALS FOR PARTICULAR CLASSES.

SEAMAN'S FLOATING HOSPITAL. Office, King William-street, City.

Consulting Physicians.—Seymour, Roupell. *Visiting Physician.*—Budd. *Consulting Surgeons.*—Dobson, Lawson. *Superintendent.*—Lieut. Saunders, R.N. *Resident Surgeon.*—Busk. *Assistant Surgeon.*—Tuckett. *Apothecary.*—Salter.

The Hospital Ship, late her Majesty's ship *Dreadnought*, 104 guns, is moored off Greenwich. Sick seamen, of every nation, on presenting themselves alongside, are immediately received, without any recommendatory letters.

Cases admitted in 1837, 2731. Expenditure, £6335.

LONDON FEVER HOSPITAL.

Pancras-road.—Established in 1802.

Physicians.—Tweedie and Southwood Smith, 1824, who attend daily at their convenience. *Assistant Physician.*—Crawford, 1833. *Consulting Surgeon.*—Lawrence, 1830. *Resident Medical Officer.*—Goodfellow: salary, 100 gs. Average number of patients about 25. Beds 62.

Supported by voluntary contributions, and the payment of one guinea each for domestic servants of non-subscribers and parish paupers. Expenses from 1200*l.* to 1400*l.* Governed by a committee of governors elected annually.

1837. Patients, 400; deaths, 67.

SMALL POX AND VACCINATION HOSPITAL, Battle-bridge, St. Pancras. —Instituted, 1746.

Physician.—G. Gregory. *Resident Surgeon*—J. F. Marson.

1837. Cases admitted, 251; deaths, 46; vaccination, 3078. Expended, £900.

LOCK HOSPITAL, (for Venereal Cases only,) Grosvenor-place. — Instituted, 1770.

Physician. — Gairdner. *Surgeons.* — J. Briggs, R. B. Walker. *Assistant Surgeon.*—E. Cutler. *Apothecary.*—J. P. Wall.

ST. LUKE'S HOSPITAL FOR LUNATICS, Old-street. Instituted, 1751.

Physicians. — Sutherland, Warburton. *Surgeon.*—J. Luke. *Resident Apothecary.*—S. Barnes.

BETHLEM HOSPITAL FOR LUNATICS, St. George's Fields.—Incorporated by Henry VIII., and formerly stood in Moorfields; rebuilt in St. George's Fields, in 1815, at a cost of £123,000. Accommodation for 200 patients.

Physicians.—Monro, Morrison. *Surgeon.*—Lawrence. *Apothecary.*—Thomas.

ST. MARYLEBONE PAROCHIAL INFIRMARY, New-road. Recognized as an Hospital by the Court of Examiners of Apothecaries' Hall.

Contains 320 beds in 33 wards. All cases having the requisite legal title and qualifications admitted, without exception as to age or disease, (except small pox,) and retained until recovery or death, unless discharged uncured by desire or for misconduct; or transferred to the Lying-In, or to the Infirm and Incurable wards of the adjoining part of the workhouse, or removed to a Penitentiary or Lunatic Asylum.

Admissions for the year ending October 26, 1838, 2506; of which between 55 and 60 per cent. were Physicians' patients, and the remainder Surgeons' patients.

Gross mortality for the year on the admissions, 14 per cent. Mortality of the Physicians' wards 21·6 per cent. on the admissions. Calculating on three-quarters in which the sexes have been distinguished there has been about 9·1 per cent. excess of female admissions, and about 25 per cent. relative excess of male deaths—one male having died in every 6·16 males admitted, and but one female in every 8·3 females admitted.

The lowest number of admissions has been the last or fourth quarter, ending with October 29:—viz. 610. The highest number of admissions was the second quarter, ending March 26:—viz. 685. Of the former quarter the mortality was 1 in 8·5, nearly; and of the latter the mortality was 1 in 6·4, so that the increased quantity of sickness was attended by increase of intensity. The average stay, or days of sickness was, for the former quarter, in the medical wards, 21 days; and for the latter, 27 days, another proof of the same.

The average of days of sickness, and of sick population, on the whole year, were: Physicians' cases, about 24½ days; Surgeons' cases about 48 days; for both 36·25 days, or something over 5 weeks. Physicians' patients, about 84 per diem; Surgeons' patients, between 120 and 130; jointly, about 220. With respect to age, the distribution was nearly as usual, viz.: nearly 50 per cent. under puberty, or over 60; to take two quarters now before us,

Under 5 years of age, 12·25 per cent.
.... 15 .... 39·5 ....
Over 60 .... 14·5 ....

gives 75 per cent. for the period between 5 years of age and 60 years of age.

Physicians.—Dr. Clendinning, Dr. Macreight. *Physician Accoucheur.*—Dr. R. Lee, F.R.S. *Surgeons.*—Stafford, B. Phillips, F.R.S. *House Surgeon Apothecary.*—Clay. *Junior House Surgeons, Visitors of the Out-door Sick.*—Dr. R. Boyd, Allen. *Senior Dispenser.*—Bullivant.

ST. PANCRAS INFIRMARY.

Physician.—Willan. *Surgeon.*—Eastcott. *Consulting Accoucheur.*—Hemmings.

LONDON DISPENSARIES.

BLOOMSBURY DISPENSARY, 62, Great Russell-street.—Instituted, 1801, for the sick poor, and to extend Cow Pox Inoculation.

Physician. — Pinckard. *Surgeon.* — S. Cooper. *Apothecary.*—W. Lloyd. 1837. Patients, 2784.

CHARITABLE FUND AND DISPENSARY, 13, Fore-street, Cripplegate.

Physicians.—Venables, Waller. *Surgeon.*—G. H. Watson.—*Resident Surgeon.*—Watson.

CHELSEA, BROMPTON, AND BELGRAVE DISPENSARY, 41, Sloane-street. Instituted 1812.

Consulting Surgeon. — A. T. Thomson. *Physician.*—Baar. *Surgeons.*—E. Bowden, W. Dickenson. *Accoucheurs.* — G. Woolley, J. Perry. *Apothecary,*— (1837.)

CITY DISPENSARY, 76, Queen-street, Cheapside.—Instituted 1788.

Physicians.—Rowland, Jones. *Surgeon.*—J. C. Taunton. *Resident Surgeon.*—W. Honeywood. (1837.) Patients, 5415, Died, 54.

EASTERN DISPENSARY, Great Alie-street, and for attending Pregnant Women at their own houses. Instituted 1792.

Physicians. — Southwood Smith. *Surgeon.* — H. Reynolds. *Apothecary.* — J. Conley. (1837.) Patients, 2156.

FARRINGDON GENERAL DISPENSARY AND LYING-IN CHARITY, 60, Snow-hill, Skinner-street.

Physicians. — Venables, Munk, Thomas Elliotson. *Surgeons.* — Crookes, Chippendale. *Consulting Accoucheur.* — Morley. *Surgeon Accoucheur.* — Protheroe Smith. *Resident Apothecary.* — Clouting.

FINSBURY DISPENSARY, Rosoman-street. Instituted 1780.

Physicians.— Campbell, John Thomson. *Surgeon.*—G. Macilwain. *Apothecary.*—W. G. Bartlett.

Practical Illustrations, by Clinical Lectures, medical and surgical, are given.

The average annual number of Patients treated, 4000, under treatment, 600. (1837.)

FREE DISPENSARY, INFIRMARY FOR DISEASES OF THE SKIN, AND FEMALES, 1, Blenheim-st., Oxford-street. Instituted May, 1834.

Physician.—R. D. Thomson, M.D. *Surgeon.*—T. King. *Surgeon Accoucheur.*—W. Jones. *Dental Surgeon.*—P. E. Dove. *Consulting Surgeon.* — G. J. Guthrie, F.R.S. *Apothecary.*—J. C. Christophers.

Number of Patients during four years and a half, 8014, since its formation.

Total expenditure during the same period, 476*l.* 3*s.*

Senior pupils are permitted to visit the out-door patients, and to attend accouchments.

ST. GEORGE'S AND ST. JAMES'S DISPENSARY, 64, King-street, Golden-square. Founded 1817.

Consulting Physician. — John Webster. *Physicians.* — P. N. Kingston, M. A., N. Crawford. *Physician Accoucheurs.*—Sir J. Eyre, Edward Dew. *Surgeons.*—J. F. Palmer, W. H. Good. *Apothecary.* — — Whitwell. Salary, 100*l.* 1837. Physician's Patients, 1430, Surgical, 610, Obstetrical, 700; making a total of 2740. Of these 62 are the reported deaths. Total number of patients since foundation in 1817, 48,440.

GENERAL DISPENSARY, 36, Aldersgate-street. Instituted 1770.

Consulting Physician. — J. S. Witshed. *Physicians.*—Yeats, A. Farre, Bennett. *Surgeons.*—C. Caswell, R. B. Wyatt. *Apothecary.*—G. Turner. (1837.)

GREVILLE FREE HOSPITAL.
Greville-street, Hatton-garden.

Consulting Physician. — G. H. Weatherhead. *Surgeons.* — W. Marsden, W. G. Jones, J. Gay. *Apothecary.*—Atterbury. Patients (chiefly out-door) in the eight years, 1828-35, 32,109.

HARRISON'S SPINAL INFIRMARY, 33, Howland-street, Fitzroy-square.

Physician. — Dr. Serny. *Surgeons.* — J. Thornber, C. W. Hoyland. *Assistant Surgeon and Secretary.*—R.H. Bowness.

ISLINGTON DISPENSARY. Instituted 1824.

Physician. — C. Holland. *Surgeons.*—J. Bishop, W. Beaumont. *Apothecary.*—Harrison. Salary 150*l.*

From June 1837 to June 1838, discharged 2400, of whom 56 died.

LONDON DISPENSARY, Church-street, Spitalfields.

Consulting Physician.—Cobb. *Physician.* —R. Venables. *Surgeon.*—T. B. Curling. *Apothecary.*—W. Gayton

MARYLEBONE GENERAL DISPENSARY, Welbeck-street. Instituted 1785.

Physicians. — Bartlett, Macreight. *Accoucheur.*—Davies. —*Surgeons.* — J. G. Smith, F. Samwell. *House Surgeon and Apothecary.*—E. Moss. *Cupper.*—Betts. *Secretary.*—T. P. Lowe.

Expenditure in 1837, 703*l.*; cash in hand, 4*l.* Patients treated in 1837, 2650. Total since 1785, 82,194.

NORTHERN DISPENSARY, 9, Somers-place West, New-road. Instituted 1810.

Physicians.—T. Thompson, Stroud. *Consulting Physician.*—Roget. *Physician Accoucheur.*—D. D. Davis. *Surgeon.* —J. Bishop. *Resident Apothecary.*—Seaton.

Patients treated in 1837, 1,756; Average number, 2000.

PUBLIC DISPENSARY, Bishop's-court, Chancery-lane. 1782.

Physicians.—Waterfield, 1828; T. A. Barker, 1837. *Surgeons.*—J. Briggs, 1806, A. M. Wagner, 1829. *Apothecary.*—Wagner, M.D.

Operation Day, Saturday. Admission every day. (1837) Patients 4440.

SCOTTISH HOSPITAL IN LONDON.

Physicians.—G. Darling, J. C. Somerville, J. Webster, R. M'Leod. *Surgeons.*—J. Wardrop, R. Davidson.

The poor of Scotland, resident in London and Westminster, or within four miles thereof, are attended at their own homes, upon application being made to the Secretary, Mr. Auld, at the Scots' Hall, Crane-court, Fleet-street, by one of the above gentlemen, medical officers of the institution. (1837.)

SURREY DISPENSARY, Union-street, Southwark.

Physicians.—Whiting, 1825, Davis, 1836, Barlow, 1836, Hughes, 1836. *Surgeons and Accoucheurs.*—J. A. Gillham, 1813, G. Pilcher, 1829. *Apothecary.* —J. Staddon. (1837.)

METROPOLITAN FREE HOSPITAL, 20, Carey-street. Established 1836.
Physicians.—Ryan, Steggall, Wilkes. *Surgeons.*—Tweedle, Lucas, Dalrymple. *Apothecary.*—Jones.
Patients, 1837-38, 6462.

ST. JOHN'S BRITISH HOSPITAL, Cross-street, Hatton-garden.
Physician.—Fox. *Assistant Physician.*—Munk. *Surgeon.*—Fuller. *Resident Medical Officer.*—Hawkins.

SOUTH LONDON DISPENSARY, Melina-place, Westminster-road. 1821.
Physicians.—Hughes, Martin. *Consulting Surgeon.*—T. E. Bryant. *Surgeons.*—Smith, Yeldham. *Resident Apothecary.*—E. Nettlefold.

TOWER HAMLETS DISPENSARY, 40, Ratcliffe-highway. Instituted 1792.
Physician Extraordinary.—Cobb. *Physician.*—Fox. *Physician Accoucheur.*—Ramsbotham. *Surgeon.*—M. Toulmin. *Apothecary.*—J. S. Darby.

WESTERN DISPENSARY, Charles-street, Westminster. Instituted 1789.
Consulting Physician.—Mackinnon. *Attending Physicians.*—R. B. Todd, Goolden. *Surgeon.*—J. Malin. *Consulting Accoucheur.*—N. M'Cann. *Apothecary.*—Firth.

WESTMINSTER GENERAL DISPENSARY, 9, Gerrard-street, Soho. Instituted 1774.
Consulting Physicians. — Henderson, M'Leod, Roscoe. *Physicians.*—Evans, Lilburn. *Physician Accoucheurs.* — Merriman, Granville. *Consulting Surgeons.*—T. Copeland, A. C. Hutchinson. *Surgeons.*—R. Wade, Simpson. *Resident Surgeon.*—W. Wade.
Patients treated 1837-38, 4780.

WESTERN GENERAL DISPENSARY, Lisson-grove, South, New-road. Instituted 1830.
Consulting Physicians.—Marshall Hall, A. T. Thomson. *Consulting Surgeons.*—Sir B. C. Brodie, E. Stanley. *Medical Officers in Ordinary.*—A. Anderson, E. Barker, H. Ancell, E. Coleridge. *Assistants.*—R. Meade, T. Davies. *Resident Apothecary.*—H. Lomax.
A good report is published.
1837. Under treatment, 1st of January, 246; admitted, 1641; accidents, 251; cured and relieved, 1836; sent to hospital, 21; Dead, 34; under treatment, 220. Expenditure 585*l.*

LYING-IN CHARITIES.

BRITISH LYING-IN HOSPITAL for Married Women, Brownlow-street, Long-Acre. Instituted 1749.
Consulting Physician. — Foley. *Physicians.*—H. Davies, R. Lee.—*Surgeon.*—B. Brookes.

GENERAL LYING-IN HOSPITAL, York-road, Lambeth. Instituted 1765. Incorporated 1830.
Consulting Physician.—Locock. *Physicians and Accoucheurs.*—E. Rigby, R. Fergusson. *Surgeon.*—J. P. South.

QUEEN CHARLOTTE'S LYING-IN HOSPITAL, Manor House, Lisson-grove. Instituted 1752.
Consulting Physicians.—Roget, Copland. *Physician and Accoucheur.* — Ashburner. *Surgeon Accoucheur.* — J. Sweatman. *Assistant Surgeon Accoucheur.*—J. Cholmondeley.

CITY OF LONDON LYING-IN HOSPITAL, City-Road. Instituted 1750.
Physician.—Conquest. *Consulting Surgeon.*—W. Coulson. *Surgeon and Accoucheur.*—T. F. Ranee.

ROYAL MATERNITY CHARITY, for delivering Poor Married Women at their own houses, 17, Little Knight Rider-street, City. Instituted 1757.
Consulting Physician. — Ramsbotham. *Physician Men-midwives.* — Davis, Ramsbotham, Blundell. *Assistant Surgeon Men-midwives.*—W. Griffith, B. Kenny, W. Griffith, W. Hughes, W. A. Walford, D. Lewis, J. A. Hingeston, E. Smith, J. Ryan, W. Major, C. Gaslee, J. R. Ward. (1836.)

SOUTHWARK LYING-IN INSTITUTION, 18, Devonshire-buildings, New Dover-road. (1826.)
Physician Accoucheur.—R. Lee. *Consulting Surgeons.*—R. D. Grainger, and G. Pilcher. *Surgeons Accoucheurs.*—J. Shea, G. Sanders, D. O. Edwards.

FINSBURY MIDWIFERY INSTITUTION, Rosoman-street, Clerkenwell. (1823.)
Physician Accoucheur.—Blundell. *Consulting Surgeon.*—A. Maeilwain.

LONDON MIDWIFERY INSTITUTION. Instituted 1828.
Consulting Physician.—Roberts. *Consulting Accoucheur.*—Waller.
Women delivered, 1828-33, 3644.

THE ROYAL LYING-IN HOSPITAL, 10, Queen-street, Windmill-street, Haymarket.
Physician Accoucheur.—G. Jewell. *Surgeon Accoucheur.*—J. Elwen. *Assistant Accoucheur.*—W. Bloxam.

There are six district surgeons. 1837-38, 180 in-patients, 1000 out.

GUY'S HOSPITAL LYING-IN CHARITY. (See page 41.)

ROYAL WESTMINSTER LYING-IN INSTITUTION, Queen-square. Established 1801.
Director and Consulting Physician Accoucheur, W. Ord, M.D.

Annual number of patients, 200.

INFIRMARIES FOR CHILDREN.

ROYAL METROPOLITAN HOSPITAL, (late Infirmary,) for Sick Children, Broad-street, Golden-square. 1820.
Consulting Physician.—Granville. *Physician.*—Lilburn. *Consulting Surgeon.*—A. C. Hutchinson. *Surgeons.*—R. Davey, C. Wing. *Resident Surgeon.*—F. D. Tothill.

Attendance daily, from One till Two.

ROYAL UNIVERSAL INFIRMARY for Children, Waterloo-road. 1816.
Consulting Physician.—Copland. *Physicians.*—Davis, Cape, Willis. *Surgeons.*—W. C. Dendy, E. Doubleday, H. Hancock. *Apothecary.*—H. Hemming. Jan. 1837 to 1838, Patients 2389.

INSTITUTIONS FOR VACCINATION.

NATIONAL VACCINE ESTABLISHMENT.

8, Russell place, Fitzroy-square.

OFFICERS.

President.—The President of the College of Physicians. *Physician.*—The Senior Censor of ditto. *Surgeon.*—The President of the College of Surgeons. *Registrar.*—Dr. Hue. *Inspector of Vaccinators.*—J. A. Gillham, Esq., M.D. *Stationary Vaccinators.*—J. C. Carpue, Russell-place, Fitzroy-square; F. Agar, High-street, Whitechapel; C. R. Aikin, Baker's-buildings, Liverpool-st.; A. Buchanan, Broad-street, Ratcliff; J. A. Gillham, Surrey-chapel, Blackfriars-road; E. Leese, Baker-street, Portman-square; W. J. Lewis, Spital-square; R. H. Robertson, Jermyn-st.; R. Semple, Rufford's-row, Islington; H. Sterry, Alscot-place, Grange-road, Bermondsey; N. B. Ward, Wellclose-square.

Medical practitioners in all parts of the empire may be supplied with the vaccine lymph, without any expense, from the National Vaccine Establishment; but the applicants are requested to report the number vaccinated from the former supply. Letters of application for lymph, and communications respecting vaccination, are to be addressed—"To the Registrar of the N. V. E., 8, Russell-place, Fitzroy-square;" and inclosed in an outside cover, directed thus:—"To the Right Hon. the Secretary of State for the Home Department, Whitehall—National Vaccine Establishment." Mr. Gillham resides in Russell-place, and vaccinates daily.

ROYAL JENNERIAN AND LONDON VACCINE INSTITUTION, Providence-row, Finsbury.—Instituted 1806. Vaccinated at the Stations of the Institution during the past year, (1836) by Dr. Epps:—

Head Vaccine House, 18, Providence-row, Finsbury-square ...	3453
Union-court, Holborn Hill	2858
St. John's Church, Horsleydown	1557
(1837.)	7868

OPHTHALMIC INSTITUTIONS.

LONDON OPHTHALMIC HOSPITAL. Moorfields.—Instituted 1805.
Physician.—J.R. Farre. *Surgeons.*—F. Tyrrell, J. Scott. *Assistant Surgeons.*—G. Macmurdo, J. Dalrymple. *Apothecary.*—Martin.

Two years, 1835-36, in-door patients 193; out-patients, 10,269. For quarter ending Michaelmas, 1838, in-patients, 40; out-patients, 1387.

ROYAL WESTMINSTER OPHTHALMIC HOSPITAL, Chandos-street, Covent-garden.—1817.

Surgeon.—J. G. Guthrie.
Assistant Surgeon.—C. Guthrie.
House Surgeon.—J. W. Lucas.
Secretary.—T. R. Fowler.

Expenditure in 1837, 486*l.*; receipts, 473*l.* Cases treated, 97 in-patients, and 2,325 out-patients. Operations performed, 78 for cataract, and 5 for artificial pupil: of the former, 65 were restored to vision, 6 failed, and 7 remain under treatment: of those for artificial pupil, two only succeeded.

ROYAL INFIRMARY FOR CATARACT AND OTHER DISEASES OF THE EYE, 13, Little Portland-street, Cavendish-square.

Consulting and Operating Surgeon.—J. Stephenson.

ROYAL INFIRMARY FOR DISEASES OF THE EYE, Cork-street, Burlington Gardens.—Instituted 1804.

Operating Surgeon.—H. Alexander.
Assistant Surgeon.—H. Alexander, jun.
Consulting Physician.—Sir H. Halford.

VARIOUS INSTITUTIONS.

ROYAL DISPENSARY FOR DISEASES OF THE EAR.—Instituted, 1816. 10, Dean-street, Soho-square.

Consulting Physicians.—Sir H. Halford, Bart.; Sir M. J. Tierney, Bart. *Surgeon.*—J. H. Curtis.

1816-36, cured or relieved, 9520.

SCHOOL FOR INDIGENT BLIND, St. George's Fields. Established 1799. Incorporated 1826.

Physician.—Back. *Consulting Surgeon.*—M. Ware. *Surgeon and Apothecary.*—S. H. Sterry.

CHRIST'S HOSPITAL, Newgate-street, for the Support and Education of Children of deceased Citizens. Founded by Edward VI., 1532.

Physician.—Hue, M.D. *Surgeon.*—E. A. Lloyd. *Apothecary.*—T. Stone. *Dentist.*—W. Fox.

CHARITY TO THE BLIND. Established 1774. Christ's Hospital, London.

The Rev. W. Hetherington, in his lifetime, enabled the Governors to pay annuities of 10*l.* to each of fifty blind persons, in the hope that his example would be followed by other benevolent characters; and from additions made to Mr. Hetherington's fund, by deed of gift and by will, the Governors are this year enabled to extend the annuity to upwards of 594 persons.

Printed petitions for any blind person duly qualified, may be obtained at the counting house of the hospital, upon the personal application of a friend, from the 7th of Oct. to the 3rd of Nov., in every year. Without the following qualifications application will be entirely fruitless. —Birth and residence in England, to the exclusion of Wales and Berwick-upon-Tweed; age, fifty-five years and upwards; residence, three years in their present abode, and total blindness during that period; income, if any, must be under 20*l.* per annum. Those deemed objects for parish relief are excluded from the benefits of these Charities, which are intended "for those who have been reputably brought up, and who want some addition to what they have, to make life more comfortable under the misfortune of blindness."

CITY OF LONDON TRUSS SOCIETY, 76, Queen-street, Cheapside.—Instituted in 1807.

Surgeon.—J. C. Taunton.

1337. Patients, 4459.

RUPTURE SOCIETY, 26, Golden-square. 1804.

Surgeon.—G. Babington.

SOCIETY FOR THE RELIEF OF THE RUPTURED POOR, 7, Wellington-street, Borough. 1796.

Honorary Surgeons.—T. Callaway, and J. Dashwood.

ASYLUM FOR THE SUPPORT AND EDUCATION OF INDIGENT DEAF AND DUMB CHILDREN, Kent-road. —Instituted 1792.

Physicians.—Birkbeck, Babington.
Surgeons.—E. Callaway.

229 children. Annual expenditure 5939*l.* or 26*l.* each child.

LONDON FEMALE PENITENTIARY. Pentonville. 1807.

Physician.—Conquest. *Oculist.*—Ware. *Consulting Surgeon.*—G. Babington. *Surgeon and Apothecary.*—J. Hunter. *Matron.*—Mrs. Cooper.

TABLE deduced from the record of the morbid appearances found in the bodies of 219 patients, examined after death at the London Hospital in the Years 1835 and 1836, giving the cause of death, sex, and age. By T. B. CURLING, ESQ., Assistant Surgeon to the London Hospital.

CAUSE OF DEATH.	SEX.		Total.	Age.	Mean Age.
	Male.	Fem.			
Abscess beneath the pectoral muscle ...	1	...	1	63	...
Do. in the Iliac Fossa, communicating with the Bladder........	1	...	1	55	...
Ankle joint, compound dislocation of ...	1	...	1	45	...
Aortic Aneurism..................................	3	...	3	...	37
Do. and Phthisis	1	...	1	42	...
Apoplexy	6	2	8	...	61, 75
Do. Pulmonary	1	...	1	23	...
Arm, Inflammation and Sloughing of, after an operation for Aneurism of the Brachial Artery, wounded in V. S.......	1	...	1	82	...
Do. Phlegmonous inflammation of.....	1	...	1	35	...
Ascites, from disease of the liver	3	1	4	...	45, 75
Brain, disease of, or its membranes	7	4	11	...	39, 8
Do. Disease of the membranes, consequent upon a Stone in the Ear, attempts to extract it having failed........................	...	1	1	8	...
Bronchitis...	2	...	2	32 and 66	...
Burn	...	1	1	9	...
Carcinoma of the Mamma	...	1	1	50	...
Do. Mesenteric Glands......	1	...	1	39	...
Do. Stomach....................	1	...	1	65	...
Do. Skull, ribs, kidneys, &c........................	1	...	1	74	...
Do. Liver and Pancreas.....	...	1	1	58	...
Do. Uterus	...	1	1	44	...
Cervical Fascia, Suppuration of, extending to the anterior Mediastinum and Pericarditis	1	...	1	61	...
Chimney Sweepers' Cancer, with Ulceration of Inguinal Arteries, and fatal Hæmorrhage	1	...	1	50	...
Concussion	1	...	1	36	...
Cut Throat..	...	1	1	34	...
Delirium Tremens	3	...	3	...	42, 66
Doubtful	9	1	10	...	41,8
Elbow-joint, Strumous Disease of	1	...	1	9 months.	...
Epilepsy...	3	...	3	...	33,1
Erysipelas...	4	...	4	...	50
Fever..	1	...	1	30	...
Femur, fractured neck of	1	...	1	73	...
Gall Bladder, destructive ulceration of, from the presence of Gall Stones causing the escape of bile and peritonitis...	1	...	1	81	...
Heart, disease of..................................	13	3	16	...	50
Hernia, Strangulated.............................	1	2	3	...	52,66
Hæmorrhage from popliteal artery, consequent upon an abscess in the ham ...	1	...	1	34	...
Hydrophobia	2	...	2	34 and 17	...
Ileus	1	...	1	46	...
Intestine, perforating wound of	1	...	1	49	...
Do. Ruptured	2	...	2	34 and 45	...

Table continued.

CAUSE OF DEATH.	SEX.		Total.	Age.	Mean Age.
	Male.	Fem.			
Irritation, constitutional, after amputation of the penis	1	...	1	47	...
Knee and Wrist joints, severe injuries of, with fracture	...	1	1	65	...
Kidneys and bladder, inflammation of...	2	1	3	...	54,33
Laryngitis	...	1	1	25	...
Do. From a burn	...	1	1	41	...
Do. From swallowing hot water ...	2	...	2	2½ and 2½	...
Leg, gangrene of	1	...	1	39	...
Do. Phlegmonous inflammation of	1	...	1	56	...
Lithotomy	1	...	1	14	...
Liver, Acephalocysts in	1	...	1	19	...
Liver and kidney, rupture of, from accident	...	1	1	26	...
Lung, gangrene of	1	...	1	40	...
Do. (non-tubercular), abscess in	1	...	1	25	...
Lungs, rupture of, from accident	1	...	1	5½	...
Maxillary bone (superior), fungoid disease of	1	...	1	60	...
Medulla Spinalis, ramollissement of	1	...	1	36	...
Nates, sloughing of the skin on, after fracture of the femur	1	...	1	70	...
Pelvis, fracture of	2	1	3	...	40,33
Pericarditis	2	...	2	16 and	...
Peritonitis	2	3	5	...	31
Do. Consequent upon an hydatid in the liver	...	1	1	30	...
Phlebitis	...	1	1	25	...
Phthisis	28	6	34	...	34. 5
Pleuritis, including cases of Empyema...	5	...	5	...	32
Pneumonia	7	...	7	...	31, 45
Poisoning, by Arsenic,—Stomach inflamed..	...	1	1	32	...
Ribs, fractured	7	1	8	...	56, 25
Do. And lacerated brain	1	...	1	70	...
Skull fractured	17	1	19	4, 5 months.	36,5
Do.	1	...			...
Spine, disease of, including cases of Psoas abscess	...	3	3	...	28
Do. Fracture of	4	...	4	...	33, 5
Do. and skull, fracture of	2	...	2	45 and 32	...
Tetanus	3	...	3	...	30, 33
Thigh, abscesses of, after extensive laceration, and fracture of the femur	...	1	1	37	...
Urine, retention of, from enlargement of the prostrate gland	2	...	2	58 and 85	...

Number of Cases.—Males, 176. Females, 43.—Total, 219. No.

Death from Accident.			Death from Disease.		
Males.	Females.	Total.	Males.	Females.	Total.
56	13	69	120	30	150

OBSERVATIONS.

The foregoing table, though too limited to admit of important deductions respecting the various diseases, affords a fair and tolerably accurate statement of the causes of death at the London Hospital. It likewise enables us to form some estimate of the rate of mortality from accident and disease. Thus it appears that there were examined sixty-nine bodies in which death was the result of injuries. Now if we add to this sixty deaths from burns or scalds we shall have very nearly a correct* statement of all the deaths from accidental causes during the two years; since in consequence of an order from the coroner scarcely a single case of death from accident escapes anatomical investigation. During this period 2445 patients were admitted on account of accident, so that we may calculate the mortality from this cause at 5·2 per cent. The comparison of the deaths from disease with those from accident exhibits a remarkable variation, especially as the 150 instances of the former noted in the table are only a small proportion of those actually occurring. Thus if we deduct the 129 deaths from accident from 586, the total number of deaths in the hospital during the two years, we have 457 deaths from disease to 3,103 patients, being at the rate of 14·7 per cent. In a table exhibiting various statistical facts relating to the eight principal metropolitan hospitals, which appeared in the second volume of the *Almanack*,† the mortality at the London Hospital, and St. George's, is stated as higher than at any of the other hospitals. This has been attributed to the large proportion of cases of accidents admitted into these two institutions,‡ a supposition evidently erroneous, since it has been shown that at one of them the rate of mortality from accidents is not much more than one-third of that from disease. To what circumstances, then, are we to ascribe the higher rate of mortality? On glancing at the table alluded to, it will be seen that the mortality bears some proportion to the number of patients admitted, For instance, at St. Bartholomew's, where the number of in-patients during the year amount to 5,164, the deaths are 7·6 per cent.; at St. Thomas's, where the number admitted is 3,000, the deaths are 8·7 per cent.; whilst at St. George's the cases admitted are 2,133, and the deaths per cent. 10·6.§ At the larger hospitals of the metropolis, a greater proportion of cases of chronic diseases and slight affections are admitted than at the smaller. At the London Hospital, in consequence of the large amount of accidents, (more than two-fifths of the total number of cases received,) the weekly applications from patients, labouring under disease, considerably exceed in number the vacant beds, so that only the more urgent and necessarily more fatal cases are taken in. In estimating and comparing therefore the rate of mortality at the different hospitals it is essential to take into consideration the average number of weekly rejections and vacant beds, as well as the class of cases admitted. There is nothing either in the situation or economy of the London Hospital and St. George's, or in the practice pursued, that would account for a higher rate of mortality. Placed, one at the extreme east, and the other at the extreme west of the metropolis, they possess every advantage in regard to airiness of situation. The wards of the London are large, and their ceilings lofty, and the elevation of the ground on which it stands is no less than thirty feet above the level of the river at high water. The cause to which it has hitherto been ascribed, viz., the large proportion of cases of accidents is undoubtedly erroneous, but I think it may be attributed partly, if not entirely, to the urgency of the cases of disease admitted.*

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* The patients who died of burns not having been submitted to examination after death, the account, though not quite exact, very nearly approximates to truth.

† Page 122.

‡ Hawkins' Elements of Medical Statistics, p. 77 and 81.

§ The Middlesex Hospital would appear to form an exception, but then it contains a ward devoted to the reception of cases of chronic disease, viz., carcinoma of the mamma.

In the table the columns for the sexes exhibit a large excess of males. The hospital affords accommodation for a greater number of males than females, and in my observation there is more repugnance on the part of women to enter an hospital than with men. The fatal cases of burns and scalds were about two-thirds female.

It will be noticed that the most common causes of death, after burns and scalds, are, one phthisis, two fractures of the skull, and three disease of the heart, in the following proportions:—phthisis, thirty-four; fracture of the skull, twenty-one; morbus cordis, sixteen. The frequency of the first accords with those extended observations which show this disease to be the most fatal in this country. The mean age, however, does not agree exactly with the tables of Dr. Clark, being somewhat higher. The frequency of the second as a cause of death is accounted for by the fact that more than two-thirds of all the cases admitted were accidents, by far the most fatal of which, after burns, are fractures of the skull. Pathological anatomy has established the fact, that after a certain period of life, disease of the heart is a common cause of death. The mean age of the cases in the table appears to be fifty. Many of them were attended with dropsical effusions, and in one instance death was sudden. In eight of the cases in the table death was the result of apoplectic effusions, and in all of them the patients were upwards of fifty-five years of age. In ten instances the cause of death is stated as doubtful. This arises from the circumstance that all cases in which no alterations in structure sufficient to account for death are found, are entered in the book, at the time of the examination, as doubtful. In several of them, however, there was ample evidence to show that the fatal event was occasioned by drinking ardent spirits. In some, the history of the case would authorise us in attributing death to simple apoplexy, and in others further inquiry, and the evidence at a coroner's inquest, either proved or led to the suspicion that death was the result of poison. The eleven cases of disease of the brain were nearly all inflammatory. T. B. C.

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* The average weekly rejections at the London Hospital, in 1835, were fifteen.

UNIVERSITIES.

UNIVERSITY OF LONDON.

Incorporated Nov. 28, 1836.

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UNIVERSITY COLLEGE, London, Established 1827.

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Note.—The Asterisks denote the Committe of Management, elected March 10, 1838.

KING'S COLLEGE, LONDON, *Somerset House.—Established* 1828.

Patroness.—The Queen. *Visitor.*—The Archbishop of Canterbury. *Perpetual Governors.*—The LordChancellor; Archbishop of York; Bishop of London; LordChief Justice of theQueen's Bench; Secretary of State for the HomeDepartment; Speaker of the House of Commons; Lord Mayor of London; Dean of St. Paul's; Dean of Westminster, *Life Governors.*—Duke of Rutland, K.G.; Duke of Northumberland,K.G.; Duke of Wellington, K.G.; Marquess of Bute; Marquess Camden, K.G.;

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UNIVERSITY OF OXFORD.

PROFESSORS.

Regius Professor of Medicine, 1822.—John Kidd, D.M. Student of Ch. Ch. The Regius Professorship was founded by Henry VIII., with a yearly revenue of 40*l*., to be paid out of the Royal Exchequer. This, however, is not the whole of the endowment belonging to the Professorship; for in 1617, James I. gave the Mastership of the Hospital at Ewelme; and in 1623, Tomlins' Prælectorship of Anatomy was annexed to this Professorship.

Clinical Professorship.—The fund for the foundation of the Professorship for reading Clinical Lectures, in the Radcliffe Infirmary at Oxford, to the Students in Medicine, was left by the will of the Earl of Litchfield, Chancellor of the University, who died in 1772. The Professor is elected by the Members of Convocation, and no person is eligible who shall not have taken a Doctor's degree in Medicine five years at least before his election.

Professor, 1830.—James Adey Ogle, D.M. Trinity.

Lee's Lecturer in Anatomy.—An Anatomical Lectureship was founded about the year 1750, by the late Matthew Lee, D.M. of Christ Church.

Two Courses of Lectures in Anatomy are given every year in the Anatomical School at Christ Church; one in Lent, the other in Michaelmas, Term.

Lecturer.—John Kidd, D.M. late Student of Ch. Ch.

Tomlins' Prælector of Anatomy.—The Anatomical Lecture was founded by Richard Tomlins, Esq. of Westminster, in 1623, by whose statutes the Lectureship is to be holden by the Regius Professors in Medicine.

Aldrichian Professorships of Anatomy, of the Practice of Medicine, and of Chemistry.—These Professorships were founded in 1803, under the will of Dr. George Aldrich, a physician, of the county of Nottingham; and to that of Chemistry, an augmentation of salary has been since made by a grant from the Crown. The Professors of Medicine and Chemistry are elected by Convocation.

The remaining Professorship is annexed to the Prælectorship of Anatomy.

Professor of the Practice of Medicine, 1824.—James Adey Ogle, D.M. Trinity.

Professor of Anatomy.—1822. J. Kidd, D.M., late Student of Ch. Ch. *Professor of Chemistry.*—1822. C. G. B. Daubeny, D.M., Fellow of Magdalen.

One Course of Lectures in Chemistry is given every year, at the Museum; the Course usually commencing in Michaelmas Term.

Botanical Gardens and Professorship.—The Botanic Garden was founded by the Earl of Danby, in 1632. In 1728, William Sherard, D.C.L., some time Fellow of St. John's College, and Consul at Smyrna, bequeathed to the University his library and very valuable Herbarium, and 3,000*l*. for the endowment of a Professorship. Before the Sherardian Institution, Professors were appointed by the University. The Sherardian Professorship is in the gift of the College of Physicians. In 1793, the Professorship was augmented by a grant from the Crown, for many years charged upon the Privy Purse, but now annually voted by Parliament.

Sherardian Professor.—1834. C. G. B. Daubeny, D.M., Fellow of Magdalen.

RADCLIFFE'S LIBRARY.

This Library is entirely appropriated to the reception of books on Medicine, Surgery, Botany, Chemistry, Geology, Mineralogy, and other branches of Natural History. The munificent founder was John Radcliffe, M.D., who was born at Wakefield 1650. By his will, Sept., 13, 1714, he appropriated 40,000*l*. for the building, and purchase of the ground on which it stands; 100*l*. per annum for the purchase of books, and 150*l*. per annum for the Librarian. The Librarian must be at least a Master of Arts, and is elected by the following persons: the Archbishop of Canterbury, the Lord Chancellor, the Chancellor of the University, the Bishops of London and Winchester, the two Principal Secretaries of State, the two Chief Justices, and the Master of the Rolls, or the major part of them.*

RADCLIFFE'S TRAVELLING FELLOWS.

Dr. Radcliffe by his will charged his estate in Yorkshire, now possessed by University College, with the payment of 600*l.* per annum to "two persons, to be chosen out of the University of Oxford, when they are Masters of Arts, and entered on the Physic line, for the maintenance of the said two persons for the space of ten years, and no longer, the half of which time at least they are to travel, in parts beyond sea, for their better improvement. And in case of their decease, or after the expiration of the said ten years, for the maintenance of two other persons, to be chosen in like manner and for the same term of years, and so from time to time for ever. And if any vacancy happen of one or both, that the places shall be filled up in the space of six months."

Dr. Radcliffe also assigned chambers in University College, to the two travelling Fellows.

The Electors are the same as for Radcliffe's Librarian.

EXERCISES FOR DEGREES IN MEDICINE.

For the degree of Bachelor in Medicine, all Students in that faculty are eligible when they have completed twenty-eight terms from the day of Matriculation, and for a Doctor's, three years must intervene from the time of the Candidate's having taken his Bachelor's degree.

In Medicine, all Students (besides undergoing the same examination appointed for Bachelors of Arts,) are to be examined by the Regius Professor of that faculty and two Examiners, of the degree of Doctor in Medicine, who are to be appointed by the Vice-Chancellor, in the theory and practice of Medicine, in Anatomy, Physiology, and Pathology; in the Materia Medica, as well as in Chemistry and Botany, so far as they illustrate the science of Medicine; and in two, at least of the following ancient Medical writers, Hippocrates, Aretæus, Galen, and Celsus.

For a Doctor's degree in Medicine, a dissertation upon some subject, to be approved by the Professor of Medicine, is to be publicly recited in the Schools, and a copy of it afterwards delivered to the Professor.

UNIVERSITY OF CAMBRIDGE.

Regius Professor of Physic, founded by Henry VIII., 1540; salary 40*l.* per annum. *Principles of Pathology and Practice of Physic.*—J. Haviland, M.D., 1817.

The course begins at the division of the Lent Term, and continues till the division of the Easter Term; it consists of about fifty lectures. Fee, five guineas first course; afterwards gratis.

Chemistry, founded 1702; salary 100*l.*—Professor J. Cumming, M.A., 1815. *Astronomy and Experimental Philosophy.*—J. Challis, M.A., 1828. *Anatomy*, founded 1707; salary 100*l.*—W. Clark, M.A., 1817.

Fifty Lectures delivered in the Michaelmas and Lent Terms, (after the division of each,) between the hours of one and two. Fees, five guineas for each of two courses; afterwards gratis.

The pupils have the opportunity of dissecting in private. The Museum consists of several hundred preparations, and a series of anatomical models in wax, executed, under the direction of the present Professor, at Florence and Bologna. New buildings have lately been erected for an Anatomical Museum, with a lecture-room and dissecting-rooms.

Botany; founded 1724; salary 200*l.*—J. S. Henslow, M.A., 1825.

These Lectures are delivered during the Easter Term. The Professor occasionally makes herborising excursions with his class.

Geology.—A. Sedgwick, 1818.

Natural and Experimental Philosophy..—W. Farish, M.A., 1813; and R. Willis, M.A. 1837. Salary 160*l.* per annum.

Downing Professor of Medicine; founded 1800: salary 200*l.* per annum.—Cornwallis Hewett, M.A., 1814. Lectures on Pathological Anatomy in Michaelmas Term. One body was dissected at Cambridge in 1833.

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* The University is indebted to the Messrs. Duncans of New College, for a selection of casts from the best statues of antiquity, and to Stephen Jarrett, Esq., Hon. M. A. of Magdalen College, for the entire collection of the Corsi Marbles, now deposited in the Radcliffe Library.

London Medical Schools, Courses, Days and Hours of Lecturing.

SCHOOLS.	ANATOMY. PHYSIOLOGY.	ANATOMICAL DEMONSTRATIONS.	BOTANY.	CHEMISTRY.
Aldersgate.[*]	Skey 3g. 5g. 8g. Daily, 2½ p.m.	Skey, Rees, White 3g. 5g. 6g. Daily, 9 a.m.	Quckett 3g. 4g.	Pereira 3g. 5g. 6g. T. Th. S. 10 a.m.
St. Bartholomew's Hospital.	Stanley 5g. 9g. 10g. Daily; 2½ p.m.	Wormald, M'Whinnie—3g. 6g. 10g. Daily, 9 a.m.	Farre 3g. 5g. 8g.	Brand, Griffith 4g. 6g. 8g. M. W. F. 10 a.m.
Charing Cross Hospital.	Hancock M. T. W. T. F. 3 p.m.	Hancock, Hird Daily Exercises		Daniel 1 p.m. M. T. Th. F.
St. George's School Kinnerton-st.	Tatum, Johnson 6g. 8g. Daily, 2½ p.m.	Johnson, Johnson 6g. 8g. Daily, 10½ a.m.	Dickson 3g. 4g.	*Royal Institution.* 6g. 8g. T. Th. Sat. 9 a.m.
St. George's School Grosvenor-pl.	Lane 3g. 6g. 8g. Daily, 2½ p.m.	Harrison, Blenkins 3g. 6g. 8g. Daily, 10½ a.m.		
Guy's Hospital School.†	Cooper, Cock 5g. 10g. Daily, 2½ p.m.	Cock, Hilton 4g. 10g. Daily, 11 a.m.	Johnson, Bird 3g. Th. Fr. 12 a.m.	Aikin, Taylor 4g. 6g. 8g. T. Th. S. ¼10 a.m.
King's College.	Todd 4g. 8g. 9g. M. T. W. T. F. 3 p.m.	Partridge 4g. 8g. 9g. Daily, 9 a.m.	Don 3g. 4g.	Daniell 4g. 7g. 10g. T. Th. F. 2 p.m.
London Hospital.‡	Luke, Adams, Hamilton, 5g. 8g. 10g. Daily, 2½ p.m.	Adams 3g. 10g. Daily, 11¼ a.m.	Quckett 3g. 4g.	Pereira 4g. 7g. 9g. M. W. F. 10 a.m.
Middlesex Hospit.	Tuson, Shaw 4g. 6g. 10g. Daily, 2 p.m.	Tuson, Shaw, Lonsdale—4g. 6g. 10g. Daily, 11 a.m.	Meade Summer 3g.	Everitt 5g. 6g. M. W. F. 10 a.m.
St. Thomas School	Macmurdo, Solly 5g. 10g. 2½ p.m.	Travers, jun., Clark 5g. Daily, 10 a.m.	Cohen 3g. 4g.	Phillips 5*l.* T. Th. S. 11 a.m
North London School.§	Lucas, Flood 3g. 5g. 7g. Daily, 3 p.m.	Lucas, Flood 3g. 5g. 7g. Daily, 11 p.m.	Wilks Summer. 2g. 3g. 5g.	Lewis 3g. 5g. 6g. M. W. F. 10 a.m.
Sydenham Coll.‖	Wilson 4g. 7g. Daily, 12 p.m.	Wilson 4g. 7g. Daily, 10 a.m.	Hoblyn Summer 2g. 4g.	Turner 5*l.* 7*l.* Daily, 11 a.m.
University Coll.¶	Sharpey 3*l.* 6*l.* 9*l.* Daily, 12 p.m.	R. Quain 3*l.* 6*l.* 9*l.* Daily, 10 a.m.	Lindley 3g. 6g.	Graham 3*l.* 6*l.* 9*l.* Daily, 11 a.m.
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Lit. Windmill-st. School.	Smith †† Daily, 3 p.m.	Smith Daily, 10 a.m.	Sigmond 2g. 3g.	*Royal Institution.* 6g. 8g. T. Th. Sat. 9 a.m.
Westminster Schl.	Hillies 5g. 7g. Daily, 2½ p.m.	Savage 5g. 7g. Daily, 10 a.m.	Wilkes 2g.	H. Lewis 5g 6g. T. Th. Sat. 9 a.m.

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[*] Dr. Grant lectures on Comparative Anatomy, 1*l.* the Course, T. Th. at 6 p.m.

[†] Mr. Bird lectures on Natural Philosophy, Mr. King on Comparative Anatomy. Fee, perpetual, 2*l.* 2*s.*

[‡] Dr. Little will lecture on Comparative Anatomy in the Summer.

[§] Dr. Ure will lecture on Morbid Anatomy.

[††] Perpet. to Anatomy, Physiol., and Demonst., 10g.

Fees for Three Months, Six Months, and Perpetual Attendance.

MATERIA MEDICA.	MEDICAL JURISPRUDENCE.	MEDICINE.	MIDWIFERY.	SURGERY.
Pereira 3g. 4g. M. W. F. 3½ p.m.	S. Smith, Pereira 3g. 5g.	Hope 4g. 5g. 6g. M. W. F. 8¼ p.m.	Walford 3g. 4g. 5g. M.W.F.¼ to 6 p.m.	Skey 3g. 5g. M. W. F. 7 p.m.
Roupell 5g. 7g. T. Th. S. 10 a.m.	Roupell, Burrows 3g. 4g.	Latham, Burrows 5g. 7g.—M. T. Th. F. ¼ to 4 p.m.	Rigby 3g. 6g. T. Th. S. 7. p.m.	Lawrence 5g. 7g. M. W. F. 7 p.m.
Steggall 9 a. m. M. W. F.	Chowne, Bennett T. W. F. 1 p.m.	Shearman, Bennett T.W. Th. F. 4 p.m.	Chowne M. T. Th. 6 p.m.	Howship** M. W. F. 5 p.m.
Seymour, M'Leod 3g. 5g. 6g. T. Th. Sat. 11½	Lee, Macaulcy 3g. 4g.	M'Leod, Seymour 3g. 5g. M.W. F. 11½ p.m.	R. Lee 3g. 5g. M. W. F. 9 a.m.	Hawkins, Babington—3g. 5g. M. W. F. 8 p.m.
Addison 3g. 4g. T. Th. S. 3½ p.m.	Taylor 3g. 4g. M. F. 10¼ a.m.	Bright, Addison 4g. 6g. 8g. M. W. F. 3½ p.m.	Ashwell 3g. 5g. 6g. Daily, 8½ p.m.	Key, Morgan 3g. 5g. T. Th. F. 8 p.m.
Royle 5g. 5g. 7g. M.T.W.Th. 11 a.m.	Guy 3g. 4g.	Watson 3g. 5g. 7g. M.T.W.T.F. 4 p.m.	Ferguson 4g. 6g. T. Th. S. 10 a.m.	Arnott 4g. 6g. W. Th. F. 8 p.m.
Pereira 3g. 4g. 5g. T. Th. S. 3½ p.m.	Ramsbotham, Frampton. Daily, 2½ p.m. 3g. 4g.	Davies, Cobb 4g. 6g. 7g. M.T.Th.F. 8½ p.m.	Ramsbotham 3g. 5g. 7g. T. Th. S. 10 a,m.	Scott 3g. 5g. M.W.F. 3½ p.m.
Macreight 3g. 5g. T. Th. S. 9 a.m.	Leighton 3g. 4g.	Copland 3g. 5g. 6g. M. T.Th. F. 3 p.m.	Sweatman 3g. 5g. T. Th. S. 10 a.m.	Mayo 3g. 5g. M. W. F. 7 p.m.
Burton 4g. M.W.Th. F. 4 p.m.	Lister, Barker, (Summer.) 3g. 4g.	Williams 5g. 6g. M.T.Th.F. 12 a.m.	Cape 3g. 5g. 6g. M. W. S. 12 a.m.	Travers, Tyrrell 3g. 5g. M. W. F. 8 p.m.
Wilkes *2l. 4l. 5l.* M. W. F. 9 a.m.	Venables 1g. 2g.	Ryan *3l. 5l. 6l.* M. W. F. 4 p.m.	Ryan, *3l. 5l. 6l.* T. Th. S. 4 p.m.	
Barnes *2l. 4l. 5l.* M. T. W. F. 3 p.m.	Barnes (Summer.) 2g. 3g.	Hall *5l. 6l.* M. W. F. 5 p.m.	Hemming *3l. 5l.* M. W. F. 6 p.m.	Dalrymple *3l. 5l.* M. W. F. 7 p.m.
Thomson *3l. 6l. 9l.* Daily, 3 p.m.	Thomson Summer.	Elliotson *3l. 6l. 9l.* Daily, 8 p.m.	Davis *3l. 5l. 7l.* Daily, 9 a.m.	Cooper, Quain *4l. 10s. 6l.* M.W.Th. 7 p.m.
Dickson 4g. T. Th. S. ¼ to 4	S. Smith, Cooper	Hall, Bennett 4g. 6g. T.Th.S. ¼ to 7 p.m.	Ramsbotham 3g. 5g. 6g. M. W. F. ¼ to 7	Pilcher 3g. 5g. M. W. F. ¼ to 4
Sigmond 3g. 5g. M. W. F. 11 p.m.	Sigmond, Jewell 3g.	Gregory 3g. 5g. 6g. M. T.W.Th. 9 a.m.	Jewell, Bloxam 3g. 5g. T. Th. S. 6 p.m.	Palmer, Smith 3g. 5g. M. W. F. 4 p.m.
Basham 4g. 5g. M. W. F. 11 a.m.	Child 2g.	Burne 3g. 5g. M. W. F. 7½ p.m.	North, Griffith 3g. 5g. T. Th. S. 11 a.m.	Phillips 3g. 5g. M.W.F. 6½ p.m.

‖ Dr. Grant lectures on Comparative Anatomy; fee, *1l. 1s.*

¶ Dr. Grant lectures on Comp. Anatomy and Zoology daily, except Saturday, at 3; fee *4l.* Dr. Carswell on Morbid Anatomy, in the Summer.

** Perpetual to all, *45l. 5s.*

The Courses of Botany and Medical Jurisprudence are severally delivered in the Summer.

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PROVINCIAL HOSPITALS.

Where a return was not obtained in 1838, the date will be found between parentheses. The date of election is placed after the name of the Medical Officers; where the House Surgeon's salary is stated, it will be understood that he lives in the house. On the days of admission, patients are received with recommendations; *accidents* are received at all times; if *acute* diseases and fevers were received on the same condition, more would, probably, be treated in the Hospitals.

The titles have generally been added after the officers of Societies, to distinguish the medical from other members. The contractions will be understood without difficulty. The orthography of names (so difficult to print) will, it is hoped, be found accurate, but any errors pointed out shall be corrected in the next Annual.

Aylesbury.

GENERAL INFIRMARY.

Physician.—W. Edmunds, M.D., 1833. *Surgeons.*—R. Ceely, 1833; W. Hayward, 1833; J. H. Ceely, 1833; H. Hayward, 1835. *House Surgeon.*—W. Vores, 1837. The physicians and surgeons (W. and S.) attend at 11 o'clock.

House surgeon's salary, 55*l.*, and premium with house pupil, except 20*l.* paid yearly to the Governors.

The *Library* (23 subscribers) contains upwards of 300 volumes, and most of the medical periodicals.

Four years, 1834 to 1838. In-patients, total admitted, 551. Average number in the house, 17·75. Cured, 186; died, 20. Out-patients admitted, 761; out-patients made in-patients, 40; in-patients made out-patients, 74. Total expenditure, 3627*l.*; of this for building and furniture, 535*l.*; for drugs, bottles, and leeches, 447*l.* 14*s.* 1*d.*; surgical instruments, 94*l.* 9*s.*; spirits and wine, 45*l.*

Barnstaple.

DISPENSARY.—1832. *Physician.*—Dr. Bignell. *Consulting Surgeons.*—C. N. Cutliffe, T. Owen, J. March, R. Harding. *Surgeons.*—C. Hiern, T. B. Torr, J. Winter. *Resident Apothecary.*—Mr. J. C. Turner.

Bath.

BATH HOSPITAL, 1742.—Beds, 133. *Physicians.*—E. Barlow, 1819; J. B. Daniell, 1830; T. S. Watson, 1834. *Surgeons.*—G. Kitson, 1817; R. F. George, 1827; G. L. Wood, 1836. *House Apothecary.*—E. Skeate.

The Bath Hospital is open to all persons suffering from diseases capable of being benefited by the Bath Waters, such as nervous derangements, in which the brain is not materially affected, diseases of the skin, palsy from lead, and dyspeptic complaints; acute cases, or cases considered incurable, are not admitted. When application is made for admission, it must be accompanied by a medical report, containing the name, age, and parish of the patient; a brief history of the disease, and a correct representation of the general health. Each patient is placed under the care of a physician and a surgeon, who attend conjointly twice a week, and admit applicants weekly.

1837—1838.

Remaining in the House	94	
Admitted	505	—599
Discharged	491	
Remaining in the House	108	—599
Deaths....................................	2	

UNITED HOSPITAL, founded by the junction of the *Bath City Infirmary and Dispensary*, and the *Bath Casualty Hospital* in 1826.—Beds 83. *Physicians.*—E. Barlow, W. Bealy, E. B. Harman. *Surgeons.*—G. Norman, J. S. Soden, R. W. Brown. *Apothecary.*—J. Crosby. *House Surgeon.*—R. C. Burleigh.

The appointment of resident house surgeon is filled by one of the senior pupils; he holds the office for one year.

The patients—chiefly acute cases—are seen daily by their respective physicians and surgeons, who also admit patients, and see *out*-patients in daily rotation. *Out-patients* are admitted without recommendation, "and the advantage is great;" those who cannot attend are seen at home.

1837. Out-patients, Medical, 8,676; Surgical, 4766.—In-patients, Medical, 487; Surgical, 475; Servants, 31.—Total, in and out, 14,435. Of 8,676 Medical out-patients, 96 died: and 41 out of 487 in-patients. Out of 475 in-patient, Surgical, 19 died. The report furnishes no return of the deaths of the Surgical out-patients, 4,766 of whom were treated. Expenditure, 3,294*l.* 14*s.* 2*d.*

A valuable *Anatomical Museum* is attached to this hospital: and a course of *Anatomical Lectures* is given every winter by Mr. Norman and Mr. Gore. The *Library* already contains some hundred volumes.

There is a *Literary and Scientific Institution* in Bath. 175 proprietors; 32 subscribers. Expenditure 518*l.*

MEDICAL SOCIETY.

Members meet the first Friday in October, November, December, January, February, March, and April, at 7 p.m. Reading Room, Prince's Buildings.

CHARITABLE SOCIETY FOR LYING-IN WOMEN.

Physician.—E. Barlow. *Consulting Surgeons.*—W. J. Church, J. F. Barnard. *Surgeons.*—R. Falkner, H. Massy, W. R. Baynton. 1837. Women relieved, 310.

DORCAS LYING-IN CHARITY.

Physician.—Bowie. *Surgeon and Accoucheur.*—G. King.

INFIRMARY FOR DISEASES OF THE EYE. 1811.

Physician.—C. Greville. *Consulting Physician.*—J. F. Davis. *Surgeon.*—J. S. Soden.

1837, Patients admitted, 747; cured, 634; twenty-five years, 1811—37, 12,545. Expenditure, 1837, 86*l.*

EAST AND NORTH WALCOTT DISPENSARY.

Physicians.—W. Irvine, J. B. Daniel, S. Watson. *Surgeons.*—J. F. Barnard, W. J. Sugden, R. Falkner.

1837, Patients, 1805. Expenditure, 235*l.* 2*s.* 4*d.*

INSTITUTION FOR DISEASES OF THE CHEST.—Instituted 1835.

Physician.—James Watson.

1837. Patients admitted, 384.

Receipts, 34*l.* Expenditure, 17*l.* 9*s.*

A gratuitous Course of Lectures on the application of auscultation and percussion, was delivered during the winter.

BATH HUMANE SOCIETY.

Objects the same as those of the London Society.

1837. Forty persons who attempted suicide by drowning, or who accidentally fell into the water, were attended by the officers of the Society, and 38 fully recovered.

Receipts, 190*l.* 5*s.* 6*d.* Expenditure, 70*l.* 13*s.* 2*d.*

Bedford.

INFIRMARY, founded 1830, enlarged 1831. 90 beds. *Physicians.*—G. Whit, 1832; W. R. Mesham, 1835. *Surgeons.*—J. Harris, 1832; I. Hurst, 1832. *Consulting Surgeons.*—C. Short. 1803; J. Pulley, 1830. *House Surgeon,*—T. Chapman, 1832. Salary, 63*l.*, and the premiums of two pupils, except 25*l.* paid by each to the Governors. The Physicians and Surgeons attend every W. and S., when out-patients are seen, and in-patients are admitted or discharged.

The Library of the Infirmary contains about 1300 volumes, and is supported by guinea subscriptions of 30 members. The Governors of the Infirmary only subscribe 10*l.*; yet the Library becomes their permanent property.

Birmingham.

GENERAL HOSPITAL.

Mr. Hodges is one of the surgeons: the other medical officers are unknown.

One year, 1836-7. Patients admitted on recommendation, 2901; casualties and slight cases, admitted *without* recommendation, 10,919; teeth drawn, 2532; medicines, 4922; wounds dressed, 2455; bleedings, 376; burns, &c. 334.

SCHOOL OF MEDICINE AND SURGERY, 1836-7.

The Birmingham General Hospital and Dispensary are open to Students under the usual regulations, and Clinical Lectures, with Pathological illustrations, will be given by J. Johnstone, Eccles, and B. Davies.

Terms:—Hospital Medical Practice, Eighteen Months, 12 Guineas. Dispensary, Unlimited, 6 Guineas.

LECTURES.

Anatomy, Physiology, and Pathological Anatomy, Anatomical Demonstrations, W. S. Cox. *Chemistry,* J. Woolrich. *Materia Medica,* J. Johnstone. *Medicine,* J. Eccles. *Forensic Medicine,* J. Birt Davies. *Midwifery,* J. Ingleby. *Botany,* G. B. Knowles. *Surgery,* W. Sands Cox.

Connected with the School are Museums of Human and Comparative Anatomy

Pathology, Natural History, and Materia Medica, and a Library containing upwards of 1000 volumes. The Botanical Class have free admission to the Birmingham Botanical and Horticultural Gardens.

EYE INFIRMARY.—1823.—*Surgeons.* —J. J. Ledsam, R. Middlemore, Dr. W. Compton. *Consulting Surgeon.* — J. Hodgson.

Bolton.

DISPENSARY.—1816.—There are six unpaid Practitioners, and a house-surgeon with a salary of 120*l.*, who visits the home patients.

Bridgewater.

INFIRMARY.—Founded 1813, enlarged 1819.—Beds 35.—*Surgeons.*—J. Toogood, 1813; J. G. Toogood, 1835; J. C. Parker, 1835. *House Apothecary.*—C. Price. Salary 45*l.*

In-patients pay 2*s.* a week towards their board; out-patients attend on W. and S., or every day, if necessary, at nine o'clock.

EYE DISPENSARY.—Erected in 1834, by J. Toogood, Surgeon, and supported solely at his expense. It contains four beds, and would contain many more: a spacious room, serving as a library and museum, is attached. (1836.)

Brighton.

SUSSEX COUNTY HOSPITAL .

DISPENSARY.

LYING-IN INSTITUTION

INFIRMARY FOR DISEASES OF THE EYE.

There are such institutions, but the officers are unknown.

Bristol.

INFIRMARY.—1736. *Physicians.* — J. C. Prichard, 1821; G. Wallis, 1822; J. Howell, 1829; H. Riley, 1835. *Surgeons.*—R. Smith, 1796; R. Lowe, 1807; N. Smith, 1816; J. Harrison 1836; W. F. Morgan, 1836. *House Surgeon and Apothecary.*—Vachell, 1833. Salary, 142*l.*

Each physician is allowed to have three pupils; who severally pay him 15 guineas, and the Charity 5 guineas for 15 months' attendance. The in-door apprentices' fee to a surgeon is 500 guineas; out-door, 300 guineas. Dressers pay 50 guineas the first year, and 40 the next; each surgeon has three. There are no walking pupils. During the week of each surgeon, one of his pupils is boarded in the house; for *this* an apprentice pays 25*l.*, a pupil, 5*l.*, the year. Days for receiving patients M. and W., at one o'clock.

There are three house-pupils; each pays 300 guineas, 60 of which go to the house surgeon.

The physicians and surgeons are bound to see the patients twice a week. On S. the surgeons meet, and go round together. The Lecturing-room will hold 60 persons. Wallis, Riley, Hetling, and Harrison, deliver lectures here regularly; the other officers occasionally.

By a new rule made to favour the medical schools here,—each surgeon is allowed 3 dressers, and 3 walking, or non-assistant pupils; the latter pays 20*l.* to his surgeon, and 5*l.* to the house, and 1*l.* to the house-surgeon, for every 12 months.

The physicians are allowed six pupils each; the pupil must pay 5*l.* to the house, and 5*l.* to the physician, and 1*l.* to the house-surgeon.

The physician's pupils usually enter for 15 months.

Two pounds out of the 5*l.*, paid to the house, is for the augmentation of the library, which will now be soon a very good one.

The operating Theatre is commodious and well lighted: its gallery will contain 100 spectators, and is often full: the Faculty exercising a most exemplary liberality towards their brother practitioners.

Post mortem examinations take place on all cadavera, unless circumstances forbid it.

There is a museum attached to the Hospital, which was deposited by Mr. Smith.

(For the statistics of the Infirmary, see Annual, 1837.)

GENERAL HOSPITAL.—1832.—*Physicians.*—Symonds, Fripp; elected at the opening of the hospital. Attend (alternately) on T., W., F., and S., at eleven, A. M.; and on M. and Th., on their respective admission weeks. *Surgeons.*—J. G. Wilson, G. D. Fripp, H. Brigstock, J. G. Lansdown; elected at opening of hospital. Two former attend on Th. and F.; two latter on W. and S., at one. One of the surgeons also attends in rotation on M. and Th. to admit patients.

The Medical Officers are elected for ten years, and no one is re-eligible to the vacancy caused by his own retirement.

House Surgeon-Apothecary.—W. Lang. Salary, 60*l.* per annum; and 60*l.* out of every house-apprentice's fee.

Clinical Lectures are required by the rules to be given by every Medical Officer; they are delivered as opportunities occur.

Pupils.—Three allowed to each physician and surgeon, pay 5 guineas annually to the Institution; and physicians' pupils pay 15 guineas for eighteen months' medical practice; none are admitted for a shorter time. Surgeon's pupils, 15 guineas for twelve months' surgical practice. All surgical pupils are dressers.

Honorary surgeon-apothecary is allowed two apprentices. Fee, 200*l.* to the House, and 60*l.* to the house-surgeon, for five years. They may witness operations, but not become dressers.

A self-supporting Dispensary is attached to the hospital.

MEDICAL SCHOOL. — *Anatomy and Physiology.*—Riley, H. Clark. *Surgery.*—H. Clark, G. D. Fripp. *Materia Medica.*—J. Bernard, Symonds. *Chemistry.* — Herapath. *Anatomical Demonstrations.* — Colthurst. *Midwifery.* —G. H. Hetling.

Lectures delivered in the Summer.

Botany.—Rootsey. *Forensic Medicine.*—W. B. Carpenter; and *Chemical Toxicology.*—Herapath. (1837.)

SCHOOL OF ANATOMY AND MEDICINE, 16, Orchard-street.

The Museum of Dr. Wallis contains several hundred preparations, a complete Cabinet of Materia Medica, and an excellent Herbarium.

The Medical Library is open to pupils, upon the payment of a guinea annually.

St. Peter's Hospital is the General Hospital for the poor of Bristol. It contains 26 wards for all purposes. Of these 11 are expressly appropriated to the accommodation of the sick, and contain 150 beds. There are, therefore, Medical, Surgical, and Lying-in wards; together with a Lock ward and Lunatic Asylum. An extensive out-door or Dispensary practice is also attached to the hospital.

Pupils, except the apprentices of the Medical Officers, not generally received.

Physicians.—Lyon, Williams. *Surgeons.*—Duck, Day. *House Surgeon and Apothecary.*—Brady. (1837.)

THE DISPENSARIES.—1776.—North-street and Queen-square. Founded to afford relief to paupers at their own houses, and for the accouchement of married women.

THE BRISTOL INSTITUTION FOR THE CURE OF DISEASES OF THE EYE.—1810. *Surgeon.*—H. Goldwyer, 1820.

Twenty-five years, 1811-35; patients admitted, 13,546; cataracts cured, 139. About 4 in-patients are generally under treatment, mostly cases of operation. Annual disbursement, about 160*l.* 1837.

THE EYE DISPENSARY.—1812. *Surgeon.*—J. B. Estlin.

Patients admitted in 1837, 1,823; from 1812-37, 24,294. Annual expense, 70*l.*; ten or twelve patients lodged and boarded during the year, whilst under operations.

THE BRISTOL LIBRARY, established 1615, and in 1772 made "The Bristol Library Society," now possesses more than 15,000 volumes, many of which are of great value.

MEDICAL LIBRARY. — 1831. — Orchard-street. *Treasurer.* — Mr. Surrage. *Secretary.*—Dr. Dick. *Honorary Librarian.*—Mr. Green.

Meetings for discussion of Medical subjects the third Saturday in every month, from Oct. to April inclusive, at half-past 7, P.M. Members amount to 56. Admission on payment of 2 guineas annually. The Library contains about 2000 vols.

PHILOSOPHICAL AND LITERARY INSTITUTION.—1809. *Pro Directors.* —W. D. Conybeare, J. C. Prichard. *Secretaries.*—A. Hartnell, S. Worsley. 1835. — Expenditure, 1,127*l.* Several valuable papers have been read before the Society. It was the scene of Davy's first labours. (1837.)

Bury St. Edmunds.

SUFFOLK GENERAL HOSPITAL.
Officers unknown.

EAST SUFFOLK HOSPITAL. — 1836. *Physicians.*—Baird, Beck. *Surgeons.*—Bartlett, Bullen, Hammond, and Sampson. Beds, 30.

Cambridge.

ADDENBROOKE'S HOSPITAL.—1766. Beds, 80. *Physicians.*—J. Haviland, 1817; F. Thackery, 1827: J. H. Bond, 1830. *Surgeons.*—C. Lestourgeon, 1813; J. Okes, 1817; A. S. Abbot, 1817. *Apo-*

thecary and House Surgeon.—G. Johnson, 1830.—Salary 80*l.*; he is allowed two in-door pupils, for whose board he pays 60*l.* to the hospital.

The physicians and surgeons attend on M. and S., at 11 o'clock, to see the out-patients. Admission day, W. *Public notice is sent to all the medical practitioners in the town when operations are to take place.* This is highly creditable to Cambridge. There is no museum attached to the hospital; but all the preparations are sent to the extensive museum of the University. The hospital has a good collection of calculi.

The beds, now 80, are about to be increased to 105.

Clinical lectures are delivered by Dr. Haviland occasionally.—(1836.)

Canterbury.

GENERAL KENT AND CANTERBURY HOSPITAL.—1793. *Consulting Physician.*—H. W. Carter, 1836. *Physicians.*— Dr. Lochee, 1838; J. M'Divitt, 1836. *Surgeons.*—D. B. Major, 1824; W. H. Renwick, 1829; P. B. Hallowes, 1830; H. Denne, 1835. *Consulting Surgeon.*—W. Filch. *House Surgeon and Apothecary.*—W. Brown. Salary, 70*l.* *A Dispenser*, 30*l.*

The Medical officers are required to attend every W. and F. In and out-patients are admitted and discharged twice a-week.

The Library of the hospital contains 500 volumes. A new wing is being added to the present building, which, when complete, will accommodate 120 patients.

(1837.)

Carlisle.

FEVER HOSPITAL.—1820. *Medical Officers.*—T. Barnes, 1820; J. James, 1820; J. Anderson, 1820; R. Atkinson, 1830; R. James, 1830; J. Hodgson, 1830; W. Elliot, 1831.—Expenditure, 200*l.* (1837.)

DISPENSARY.—1812. The same medical officers, with the exception of Dr. Elliot. Expenditure, 240*l.* — Annual number of patients treated at the Dispensary in the ten years 1826-35, 3526.

LITERARY AND PHILOSOPHICAL SOCIETY.—1835. *President.*—R. Ferguson, Esq. *Vice-Presidents.* — T. Barnes, M.D.; G. H. Head, Esq. *Secretaries.*—Rev. E. Salkeld, A.M.; C. Hudson, M.D.—(1836.)

Chester.

THE GENERAL INFIRMARY.—1755. *Consulting Physicians.*—Thackery, Pigot, Cumming. *Consulting Surgeon.*—G. Harrison, Esq. *Physicians.* —L. Jones, 1814; P. Jones, 1835; — Edwards, 1837. *Surgeons.*—S. N. Bennett, 1801; T. Bagnall, 1806; G. Harrison, jun. 1837. *House and Visiting Surgeon.*—T. B. Peacock. Salary, 60*l.* per annum. *Assistant ditto.*—R. W. Gravet.

Total number of beds, 100. In the general department, 75; men's ward, 43; women's ward, 24; Magdalen, 8. In the fever department, 25.

Number of patients received from Mar. 25, 1837, to the 25th of March, 1838:—

In-patients, 579; 95 being cases of fever. Weekly average, 59½.

Home patients, 1144; weekly average 122.

Out-patients, 959; weekly average, 37½.

Total number of patients since the commencement of the Institution, 163,701.

In-patients are admitted by a physician and surgeon in rotation, at 11 o'clock on Tuesdays; and Out-patients on Mondays, Wednesdays, and Saturdays, at the same hour. A shilling a day is paid with all fever patients by the persons recommending; or, if paupers, by the parish. Apprentices are received on payment of a fee of 200 guineas, for five years; or 60 guineas per annum. For shorter periods, and out-pupils, for 20 guineas per annum. A library of 500 volumes is attached to the hospital. Expenditure, 2,171*l.*

Chichester.

WEST SUSSEX, EAST HAMPSHIRE, AND CHICHESTER INFIRMARY AND DISPENSARY.—1826. *Physicians.*—J. Forbes, 1826; J. M'Caroghler, 1826. *Consulting Surgeon.* — J. Burnall. *Surgeons.*—A. T. S. Dodd, 1831; A. Duke, 1836. *House Surgeon.*—Salary, 60*l.* He visits the out-patients, who are not able to attend, and who are within a certain district.

A physician and surgeon visit the patients, at 9 o'clock every Monday and Th.; admit in-patients on T., at 11. (1836.)

LITERARY AND PHILOSOPHICAL SOCIETY.—1835. *President.*—The Very Rev. G. Chandler, LL.D., F. R.S., Dean of Chichester. *Vice President.*—John Barton, Esq. *Treasurer.*— *Secretary.*—J. D. Newland, Esq.

150 members. Conditions of admission; annual subscription of one guinea—by ballot.

The Library and the Museum only erected five years.—(1836.)

Colchester.

THE ESSEX AND COLCHESTER HOSPITAL.—1820.

Physician.—A. Maclean, 1821. *Surgeons.*—R. Nunn, A. Partridge, W. Waylen. *House Surgeon.*—R. D. Mackintosh, jun. Salary, 80*l.* per annum.

No Museum or Library attached to the hospital; no Clinical Lectures delivered; forty-five to fifty patients in the House, which would contain eighty.

THE ESSEX AND HERTS BENEVOLENT MEDICAL SOCIETY.—1786, for the Relief of Widows and Orphans of Medical Men.

Receipts in 1834, from the five districts, 715*l.*

At the General Court of Audit, 1834, 340*l.* were granted to 17 Widows and Orphans of Medical Men.

COLCHESTER MEDICAL SOCIETY. 1774.—Members, 19.

Coventry

GENERAL DISPENSARY.—Instituted 1832.

Physicians.—Bourne and Mellor. *Surgeons.*—Bury, Laxon, and Troughton. *Dispenser.*—Barton.

Report from October, 1837 to 1838: Admitted, 768; cured, 387; relieved, 163; dead, 27; forfeit, 3; remaining 44; casual, 114; vaccination, 30.—Total, 768.

From commencement, 1832; admitted, 4181; Income (average,) 130*l.*; 282 of the 768 admitted, 1837-38, were visited at their houses.

Denbighshire.

GENERAL DISPENSARY.—Established 1808.

Physicians.—G. Cumming, 1808; J. Williams, 1836. *Honorary Physician.*—R. P. Jones. *Surgeons.*—R. Roberts, W. Y. Jones. *Resident Medical Officer.*—R. Jones.

1808 to 1838.—In-patients, 1163; cured, 832; dead, 39; Out-patients, 35,224; of whom 3891 were vaccinated; and 2,209 had trusses furnished to them. Average expense of In and Out-patients, for 12 years, 7*s.* 8¼*d.*

Derby

INFIRMARY.

(No return been obtained.)

Exeter.

DEVON AND EXETER HOSPITAL. —1745.

Physicians.—J. Blackall, 1807; P. Miller, 1809; F. Granger, 1822; R. L. Pennell, 1830. Days of Attendance, Tues. Wed. and Sat.; also Thursdays, for the admission of Patients. *Surgeons.*—S. Luscombe, 1803; S. Barnes, 1813; J. Harris, 1815; J. H. James, 1816.—Days and hours of attendance the same as the physicians', and frequently on other days when there is any occasion for it.

There are no regular Clinical Lectures delivered: but Clinical Instruction is afforded by the different Medical Officers.

Pupils' Fees.—For Twelve Months 30*l.*, and they act as dressers: but the greater number of pupils are apprentices to the surgeons. Their hours of attendance are from eleven to one, or at other times, if cases render it necessary. About twenty attend regularly.

There is a good, but not large, collection of Preparations, which is increasing: also a large and valuable Library attached to the hospital.

Patients admitted on Thursday. Number of beds, 200.

Average expenditure of the hospital for the last three years, 4087*l.* 4*s.* 6*d.* Its revenues are derived partly from funded property, partly from subscriptions, and partly from benefactions and legacies.

The only Lectures at present given, are Anatomy, by Mr. Barnes and Mr. James, daily, during the winter, at ten o'clock. The Fee for Admission, Two Guineas, which the Lecturers have hitherto employed in aid of the Museum.

We are indebted to J. H. James, Esq. for the following statistical facts:—

	1826-30.	1831-5.
In-patients admitted ...	4998	5147
Mean number on Jan. 1	176	171
Cured........................	3705	3685
Deaths	164	162
Out-patients admitted .	1690	1484

10 years: of 100 in-patients admitted, cured, 73; died, 3·2; in 64 days the mean term of treatment. Mortality in 36·5 days 1·88. Expenditure, 39,283*l.* 14*s.*: without any correction for medicines to out-patients, 22*l.* 13*s.* a year on each resident.—(1837.)

DISPENSARY.—1818.

Physicians.—Blackall, Miller Granger,

Pennell, Barham, Shapter. *Consulting Surgeons.*—S. Barnes, J. Harris, J. H. James, Johnson. *Surgeons.*—J. H. Stabbach, W. Kingdon, J. Tucker, E. Pridham, R. Amory, C. Webb.

Generally about eight pupils.—About 1400 patients treated annually; 17,403 since the commencement.—(1837.)

DEVON AND EXETER LUNATIC ASYLUM.—1801.

Physicians.—Blackall, Miller. *Surgeon.*—B. W. Johnson. *Apothecary.*—Luke

Usually 50 patients in the house; 25 admitted annually; treated from the commencement, 1169.—(1837.)

WEST OF ENGLAND EYE INFIRMARY.—1808.

Physician.—Blackall. *Consulting Surgeon.*—W. B. Johnson. *Surgeon.*—S. Barnes. *Assistant-Surgeon.*—P. C. De la Garde.

Number of pupils, about 6; beds, 12: annual number of patients admitted, 660; since the opening, 13,828. (1837.)

LITERARY AND PHILOSOPHICAL SOCIETY.—1836.

The Meetings are held in the evening of the first Friday of each month, from October to May inclusive.

President.—J. Blackall, M.D. *Vice-Presidents.*—Rev. W. Scoresby, P. Miller, M.D. *Treasurer.*—S. Barnes, Esq. *Secretary.*—J. Tyrrell, Esq.—These officers compose the Council.

EXETER ATHENÆUM.—Founded, 1834, for the promotion of Arts, Science, and Literature, by a body of Proprietors, who are shareholders, and have free admission to the lectures delivered from time to time, which are open to the public at a small charge. (1837.)

President.—Duke of Bedford. *Vice-Presidents.*—J. W. Buller, Esq., Rev. W. Scoresby. *Treasurer.*—J. Milford, Esq. *Secretary.*—P. Miller, M.D., who manage the affairs of the Society with a Committee of twelve Proprietors.

Gloucester.

GENERAL INFIRMARY AND COUNTY HOSPITAL.—1765.—1828, an additional wing for 54 patients.

Physicians.—H. Shute, 1815; T. Evans. 1833. *Consulting Surgeons.*—R. Fletcher, W. Cother. *Surgeons.*—J. W. Wilton, W. H. Fletcher, G. Playne, T. G. Buchanan, 1833. *House Surgeon.*—G. W. Charleton.

Clinical Lectures by Dr. Evans occasionally. The Pupils generally attend the practice of the Hospital from ten till one.

There is a Library and also a Museum.

Patients are admitted on Thursdays.

Average annual expenditure, 3500*l.*

School of Medicine.

Anatomy.—Evans, G. Playne, T. Buchanan. *Anatomical Demonstrations.*—Charleton. *Medicine.*—Shute. *Surgery.*—J. W. Wilton, and W. Fletcher. Museum and Dissecting Rooms for the use of Students.

There is a Medical Reading Society, consisting of most of the professional men; and the members of which meet monthly, for the purpose of making friendly professional communications. (1837.)

STROUD DISPENSARY.

Physician.—D. Caigell. *Surgeons.*—E. U. Uthwatt, J. G. Hillier.

CASUALTY HOSPITAL.—Just opened, (1836,) has accommodation for 15 patients. It is intended for cases of severe accident: admitted without recommendation. *Surgeon.*—Uthwatt, Hillier, Uaskbourn. *Honorary Physician.*—Caigell.

Halifax.

INFIRMARY AND GENERAL DISPENSARY.

Physicians.—R. Moulson, M. S. Kenny. *Surgeons.*—A. Jubb, J. Lister. *Apothecary.*—W. H. Peacocke.

1836—1837. Patients treated, 3623, of which physicians' cases, 1566; surgeons', 2057. Patients on books, Jan. 1, 1836, 614, making a total of 4237 treated in the year. Deaths, 104.

Harrowgate.

BATH HOSPITAL.—1826.

Established for the benefit of poor people, to whom the Harrowgate waters are recommended. No person resident in the townships of High and Low Harrowgate, or within three miles of the hospital, are admissible. Accommodates 45 patients. 1836—37, admitted, 2179; 1837, 301. Expenditure, 400*l.*

Hereford.

INFIRMARY.

Physicians.—J. Bleek Lye, J. W. Gilliland. *Surgeons.*—S. Cam, J. Griffiths. *Apothecary.*—Mr. Philip Tully.

March, 1837-1838. In-patients, remaining, 61; admitted, 512; deaths, 34. Out-patients remaining, 250; admitted, 634. Total patients from 1776 to 1838, 35,513. Expenditure, One Year, 1900*l.*

DISPENSARY.—1835.

Consulting Physicians.—S. Hughes, L. B. Lye, W. L. Gilliland. *Visiting Surgeons.*—P. James, R. Braithwaite, C. Lingen, H. C. Barnard.

August, 1837-1838. Remaining on register, 43; admitted, 346; dead, 3; cured or relieved, 292; on books, 94. Cost, 121*l.*

Hertford.

GENERAL INFIRMARY.—1833.

Physician.—Dr. Furnivall. *Surgeons.*—G. Dickens, J. Davies, R. J. D. Evans. *Resident Medical Officer.*—Towers.

1833—37. In-patients, 495; out-patients, 8938. Trusses supplied, 926.

The weekly average of in-patients has been 19. Two beds are always kept open for accidents. The building is capable of accommodating 36 patients, and can easily be enlarged. There is a small medical library. Expenditure, 1837, 1076*l.*

Huddersfield.

A Dispensary, established 1814, was converted into the Huddersfield and Upper Agbrigg Infirmary, 1831.

Physicians.—J. K. Walker, 1814; W. Turnbull. *Surgeon Extraordinary.*—W. Wilks. *Surgeons.*—Robinson, J. Bradshaw, Greenwood. *House Apothecary.*—Clark.

1837. In-patients, 308; out-patients, 4003. Of the in-patients 204 were males, and 76 females. Ages, under 20, 94; above 20 and under 40, 103; above 40 and under 60, 61; 60 and upwards, 20. Of the out-patients 1677 were males, and 1916 females. Ages, under 20, 1222; above 20 and under 40, 1052; above 40 and under 60, 966; 60 and upwards, 353. There were 400 more out-patients admitted last year than in the year preceding, and 41 more in-patients, "arising principally," says Dr. Walker, "from the embarrassment of the poor from want of work during that period." The number of beds is now 35. Expenditure, 1526*l.* House Surgeon, 60*l.* per annum with board and lodging.

Hull.

KINGSTON-UPON-HULL GENERAL INFIRMARY.—1782.

Physicians.—W. H. Bodley, M. Chalmers, J. Alderson. *Surgeons.*—G. Fielding, F. Huntingdon, R. Craven. *Apothecary and House Surgeon.*—J. Higson.

A valuable *Medical Library* has been collected by the contributions of the Faculty in the town and neighbourhood.

HULL AND EAST RIDING OF YORK SCHOOL OF MEDICINE AND ANATOMY.—Kingston Square.—1831.

Anatomy and Physiology, R. Craven and E. Wallis. *Anatomical Demonstrations*, E. Wallis. *Botany*, Smith. *Chemistry*, Pearsall. *Materia Medica and Therapeutics*, H. Cooper. *Medical Jurisprudence*, Alderson, Langstaff, and Hardy. *Medicine*, Alderson, A.M. *Surgery*, R. Craven. *Midwifery*, Hardy.

HULL AND SCULCOATES DISPENSARY.—1815.

Physicians.—M. Chalmers, F. R. Horner. *Surgeons.*—J. M. Fullam, C. T. West, W. H. Lee. *Dispenser.*—W. H. Davies.

Patients admitted, 1815-36, (22 years,) 36,703; total expenditure, 7,957*l.* Admitted 1835-6, one year, 1461: expended, 385*l.*—(1836.)

Kent

MEDICO-CHIRURGICAL SOCIETY.

1837.

COUNCIL.

President.—Mr. R. D. Grainger, Lecturer on Anatomy and Physiology. *Vice-Presidents.*—Mr. Busk, Senior Surgeon, S. H. S. Dreadnought; Sir R. Dobson, Senior Surgeon, Greenwich Hospital; Dr. Haycraft, Physician Royal Kent Dispensary; Dr. Parkin, Senior Surgeon, Royal Marine Infirmary; Dr. Staunton, Royal Artillery Hospital, Woolwich. *Treasurer.*—Mr. Sherwin. *Honorary Secretaries.*—Mr. P. Bossey, Mr. F. Cotton Finch.

The Council, desirous of establishing a permanent collection, earnestly solicit contributions of interesting specimens of diseased structures, accompanied by the history of each case, not only from the members of the Society, but also from their professional brethren generally.

With the view of rendering the character and objects of the society more generally known, the council recommend that the members of the profession, resident in the county and vicinity, should be informed that its meetings are held every second Monday during the session, from October to May inclusive, at Greenwich and Woolwich alternately; that the chair is taken at seven, and vacated at nine P.M.; that all legally qualified practitioners are eligible to become members; that the election is by ballot; that two-thirds of the members balloting elect; that the subscription is one guinea annually; and that the chief advantages it affords are the reading and discussion of original papers on subjects relating to medicine and surgery, and the establishment of a library of standard works.

Leamington.

The WARNEFORD GENERAL BATHING INSTITUTION, AND LEAMINGTON HOSPITAL. 1834. *Physicians.*—A. Middleton, J. Luard. *Surgeons.*—W. Middleton, Boulton I. Prichard, R. Jones. *Assissant Surgeons.* —M. Cottle, J. Hitchman. *Resident Dispenser.*—A. Alcock. (1837.)

Leeds.

GENERAL INFIRMARY.—1767.

Physicians.—Williamson, Hunter, Hobson. *Surgeon.*—Smith, W. Hey, T. P. Teale. *Apothecary.* — Allanson. Salary, 100*l.*

Clinical Lectures on Physic once a week, during the winter session, by Williamson and Hunter, in rotation. Clinical Lectures on Surgery once a week, during the winter session, by Smith, W. Hey, and T. P. Teale, in rotation.

Medical practice. — Fee for six months, 10g.; eighteen months, 15g.; five years, 25g. Surgical practice. — Fee for six months, 10g.; twelve months, 15g.; second year, 10g. The articled pupils of the surgeons officiate as dressers. A museum and an extensive medical library are attached to the hospital. Patients admitted every Friday. (1837.)

PUBLIC DISPENSARY.—1824.

Physicians.—D. Thorp, Hunter, Wilson. *Surgeons.*—Garlick, W. R. Cass, C. Nelson. *Apothecary.*—C. Loe.

A physician and surgeon attend on M., W., and F. The apothecary is resident.

June 1836-7. Patients admitted, 3474; of whom 1427 were visited at their own homes. Expenditure 705*l.* Drugs, 284*l.* Leeches, 64*l.*

HOUSE OF RECOVERY.—(Fever Hospital.)—Instituted 1804. *Physicians.*—Thorp, Hunter, Williamson. *Surgeons.*—W. Hey, Cass. *Apothecary,* W. Ayre.

Oct. 1835-6. Patients admitted, 255; discharged, 263; cured, 216; dead, 47; mean number remaining, 16. Expenditure, 651*l*; drugs and leeches, 48*l.*; wine and spirits, 27*l.* 12*s.*

SCHOOL OF MEDICINE. — *Anatomy, Physiology, and Pathology.* — T. P. Teale, Garlick, J. Hey. *Anatomical Demonstrations.*—Price, Nunneley. *Principles and Practice of Surgery.*—W. Hey. *Materia Medica and Therapeutics.* — Hunter. *Chemistry.* — West. *Principles and Practice of Medicine.* — Wiliamson. *Botany.* — J. Hey, Denny. *Forensic Medicine.*— *Midwifery.*—S. Smith.

Perpetual fee to all the courses, 42*l.*; 760 lectures delivered annually.

Clinical Lectures will be given to the Pupils of the Infirmary and Dispensary.

These Lectures are open to the Profession.

The meetings of the Medical Society, 1834, are held on the first Th. in every month, at seven P.M. The members of committee preside in rotation. There is a Philosophical and Literary Society, 1819, and a Literary Institution, 1834.

The library of the latter contains between three and four thousand volumes.

EYE AND EAR INFIRMARY.—1822.

Surgeons. —W. Hey, C. Nelson, T. S. Rusby. (1836.)

LYING-IN HOSPITAL.—1834.

Surgeons.—W. Price, R. C. Battye, W. Wildsmeth. *Surgeons in ordinary.*—W. M. Atkinson, W. Hey, F. Sharpe.

Leicester.

INFIRMARY.—1771.

Physicians.—Arnold, Freer. *Surgeons.*——Nedham, — Paget, jun. *House Surgeon and Apothecary.* — E. E. Wilkinson. Salary, 200*l.* a year.

Operation day, Monday.

DISPENSARY.—1833. (1835.)

Consulting Physician. — Hill. *Physician.*— ——— ———. *Surgeons.*—Gosset, Stallard, Macanley, Denton, Bowmar, C. Wood. *Dispenser.* — Fullagap.

1834, one year, Patients discharged, 2046, of whom 84 died. Expenditure, 471*l*.

There is a Library, also a Literary and Philosophical Society, in Leicester. (1836.)

Lichfield.

DISPENSARY.—1780.

Physician.—Rawson. *Surgeons.*—Morgan, Allport.

Patients under treatment, April, 1836, 76 — April, 1837, 33. Admitted in the year, 552. Cured or relieved, 580. Died, 12. Midwifery patients, 102. Trusses, 3, Children vaccinated, 143. (1837.)

Lincoln.

COUNTY HOSPITAL.—1769.

Physicians. — E. P. Charlesworth, 1808; W. D. Cookson, 1830; R. Elmhirst, 1833. *Surgeons.*—J. Snow, 1811; Hewson, 1827; F. Kent, 1832; Howitt, 1836.

1836-37. In patients, 320; Out-patients, 218; In and Out, died, 14; Casual patients, 360; 25 have been supplied with trusses. Expenditure, 1676*l*.

The physicians and surgeons attend in monthly rotation every M. and Th. mornings. *House Surgeon.*—S. Hadwen. Salary 100*l*. a year.

Patients admitted by the physician and surgeon, on M. at eleven o'clock.

GENERAL DISPENSARY.—1826.

Physicians. — E. P. Charlesworth, 1826; W. D. Cookson, 1830; R. Elmhirst, 1830. Attend at the Dispensary in monthly rotation, at 10 o'clock on T. and S. *Surgeons.*—Snow, 1826; Franklyn, 1826; Hewson, 1826; F. Kent, 1830; Hainworth, 1838. Attend in monthly rotation, according to seniority, at the request of the physician or dispenser. *House-Surgeon.*—G. B. Snow, 1836. Salary, 100*l*.

Patients admitted by the physician, on T. and S. at 10, a.m.—by the dispenser daily; home-patients at 10, a.m.; out-patients at 2, p.m.

1837-38. In-patients, 566; out-patients, 498; Dead, 37.

Expenditure, 221*l*.

LUNATIC ASYLUM.—1819.

Physicians. — E. P. Charlesworth, appointed at the establishment of the Institution; W. D. Cookson, 1831; R. Elmhirst, 1831.

The physicians, by monthly rotation, according to seniority of appointment, superintend the medical department, and attend three times a week at least.

Surgeons. — J. Snow, 1827; Hewson, 1827; Howitt, 1833.

The surgeons, by a rotation similar to that of the physicians, attend when required by the physician or house surgeon. *House Surgeon.*—R. G. Hill, 1835. Salary, 100*l*. a year.

Patients admitted at any time provisionally by the house surgeon, but the Weekly Board regulates the admission.

Terms of Admission.—First rank, 1*l*. 1*s*. 2½ guineas per week. Second, 15*s*. Third, males, 9*s*.; females, 8*s*.

1837.	M.	F.
Remained, Jan. 1	53	32
Admitted	16	17
Re-admitted	8	4
Discharged	27	15
Remaining, Dec. 31	50	38

State, when discharged, — Recovered, 15; improved, 6; removed during treatment, 5; by order of the Board, 1; Dead, 15.—Total 42.

The deaths were, from Consumption, 4; Dropsy, 1; Epilepsy, 1; Gradual Exhaustion, 1; Old Age, 3; Paralysis, 1; Typhus fever, 3; Ulcerated bowels, 1.

MEDICAL LIBRARY.—1825.

Treasurer.—Dr. Charlesworth. *Secretary.* —Mr. Hainworth. *Librarian.*—G. B. Snow.

Meetings, first Th. in Feb., May, August, and Nov., at 12 o'clock. Members amount to 14. Admission on the payment of one guinea. There are about 400 books. The Library is at the Dispensary.

LINCOLNSHIRE MEDICAL BENEVOLENT SOCIETY.—1804.

Patron.—Right Hon. Lord Yarborough. *Trustees.*—Sir G. Heathcote, Bart.; Sir R. Sheffield, Bart.; C. Chaplin, Esq. *President.*—C. F. Sutton. *Vice-Presidents.* Mr. Snaith; Dr. Charlesworth; Mr. Overton; Mr. Palmer, and Mr. Porter. *Treasurer.*—Dr. Charlesworth. *Secretary.*—Mr. Barton.

Anniversary in July. Number of members, 41. Admissions proposed by a subscriber at the anniversary meeting, which proposal is decided by a majority of the attending members.

Liverpool.

INFIRMARY.

Physicians.—J. P. Brandreth, R. Formby, T. H. Banning. *Consulting Surgeon.*

—R. Forshaw, J. Dawson. *Surgeons.*—R. Bickersteth, J. P. Halton, J. Cooper. *House Surgeon.*—J. Nottingham. *Apothecary.*—W. Burgess.

Students are admitted to the medical and surgical practice from ten to one daily; fee, 20 guineas per annum, which includes Clinical Instruction.

Clinical Medicine, Formby; *Clinical Surgery*, Dawson.

Patients in the House, 1st January, 1837, 209; admitted, during the year, 1691: of whom, cured, 936; relieved, and at own request, 508; died, 124; in the House, 1st January, 1838, 214. Weekly Average, 178.

LUNATIC ASYLUM.

Physician.—D. Baird. *Governor*, J. Owen.

Number of Patients in the House, 1st of January, 1837, 55. Admitted from 1st of January, 1837, to 1st of January, 1838, 151: of whom were cured, 51; died, 18; in the House, 1st of January, 68. Average weekly number, 65.

LOCK HOSPITAL.

Physician.—Mackenzie. *Surgeons.*—Simon, Worthington.

Patients in the House, 1st January, 1837, 47; admitted, during the year, 438: of whom were cured, 333; in the House, 1st January, 1838, 50. The weekly average s 44.

These three Institutions are managed by the same committee, and publish a common report.

1838. Expenditure, 7812*l.* Drugs, 182*l.* Spirits, wine, instruments, leeches, trusses, &c., 495*l.*

NORTHERN HOSPITAL, Leeds-street, *Established*, 1834.

Principally for the reception of accidents and acute cases. 76 beds.

Physicians.—Squires, Hannay, Nicholson. *Surgeons.*—Gill, Banner, Wainwright. *House Surgeon and Apothecary.*—B. Blower. *Assistant House Surgeon.*—G. Arnott.

Th. operation day. M., W., and F., physicians' and surgeons' visiting and admission days.

DISPENSARIES.

North, Vauxhall-road.

Physicians.—Williams, J. Carson, J. W. Vose. *Surgeons.*—Stubbs, Long, Ellis, Jones. *House Surgeon.*—W. Getty.

Three assistant house surgeons, and three apothecaries.

South.—Upper Parliament-street.

Physicians.—Duncan, Scott, Grindrod. *Surgeons.*—Minshull, Cooper, Archer.

Three assistant house surgeons. Two apothecaries.

In the year 1837, the number of Medical Cases was 28,742; Surgical, 16,697; received advice and medicine at the Institution 29,302; visited at their own homes, 16,137.

Expenditure, 3167*l.*

FEVER HOSPITAL.—Brownlow-hill.—(Attached to the Workhouse.)

Physicians.—Macrorie, Gouthwaite. *Surgeon.*—S. M'Cullock. *House Surgeon and Apothecary.*—B. Nightingale.

Admissions into the fever ward.—1834, 1102; 1835, 1097; 1836, 1680; 1837, 2447. From March 10, 1837, to March 10, 1838, the following report is published:—Remaining in the house, March 10, 1837, Fever, 75; small pox, 4. *Admitted since*—fever, 2558; ophthalmia, 120; small pox, 116; measles, 22. Of this number died, of fever, 419; ophthalmia, 2; small pox 33; measles, 9. The months of March and February, 1838, admitted the smallest number of fever patients; the months of June and September the largest number.

OPHTHALMIC INFIRMARY.—Slater-street.—1820.

Surgeons.—Edwards, Neill.

1820 to 1838, 24,704; 1837, 2186.

The number of patients who have been operated on for cataract, and artificial pupil, since the 1st of July, 1836, up to July, 1838, is 107; and upon many of these the operation has been in both eyes.

Expenditure, 216*l.*

THE LADIES' CHARITY, OR INSTITUTION FOR THE RELIEF OF POOR MARRIED WOMEN IN CHILDBED.—Established 1796.

Accoucheurs.—Messrs. Batty, Bevan, Ellison, Malins.

1837, Patients, 1284. Children vaccinated, 864. 737*l.* (cost.)

ROYAL INSTITUTION.

MEDICAL SCHOOL.

Anatomy.—Formby, Long. *Demonstrations.*—Long. *Chemistry.*—Reynolds. *Materia Medica.*—Duncan. *Medicine.*—Scott. *Surgery.*—Banner. *Midwifery.*—Malins. *Botany.*—Dickinson. *Jurisprudence.*—Duncan and Malins.

MEDICAL SOCIETY will meet at the Medical Institution.

Presidents, 1836-37.—Carson, Duncan, Worthington, Banner.

Meetings every alternate Wednesday, at 7, p.m., from October to April, inclusive. Members, 70 to 80. Regularly educated practitioners are admitted by ballot, a majority of two-thirds being required. There is a Medical Library (not connected with the Society) containing 4000 or 5000 volumes.

Manchester.

ROYAL SCHOOL OF MEDICINE AND SURGERY.

— PINE-STREET, (behind the Royal Infirmary.)—Established in 1824.

1. *Anatomy and Physiology* (*Human and Comparative*), *and Pathology.*—Turner. 2. *Anatomical Demonstrations.* — Stephens and Stott. 3. *Medicine.*—J. L. Bardsley. 4. *Materia Medica, Botany, and Therapeutics.*—Newbold, 5. *Surgery.*—Jordan, Ransome. 6. *Midwifery, and the Diseases of Women and Children*—Radford, Partington, Bryden. 7. *Chemistry.* — Davies. 8. *Anatomy, Physiology, and Pathology of the Eye.* —Hunt.

Connected with the School are Museums of Human and Comparative Anatomy (Healthy and Morbid), to which Students have free access; also, a Chemical Laboratory, a Library, and Medical Society.

At the conclusion of the session, medals and certificates of honour will be awarded to the most distinguished Students.

Morbid Anatomy and Pathology.—Stephens, R. F. Ainsworth. *General and Medical Botany.*—Just. *Forensic Medicine.*—H. Ollier.

MARSDEN STREET ROYAL SCHOOL OF ANATOMY AND MEDICINE.

1. *Anatomy, Physiology, and Pathology.*—Fawdington. 2. *Demonstrations.*—Mellor, Dumvile, Whitehead. 3. *Medicine.*—Pendlebury. 4. *Materia Medica.* —Pendlebury. 5. *Surgery.*—Boutflower. 6. *Midwifery.*—Roberton, Windsor. 7. *Chemistry.*—Leigh. 8. *The Eye.*—Walker. 9. *Pathology.*—Mellor, Whitehead. 10. *Comparative Anatomy.*—Dumvile. 11. *Botany.*—Hardy. 12. *Medical Jurisprudence.*—Boutflower, Leigh, Richmond.

Clinical Lectures on Medicine and Surgery will be given at the Royal Infirmary, by the Physicians and Surgeons of that Institution.

The Museums of Materia Medica and Botanical specimens, of Human and Comparative Anatomy, and of Morbid Anatomy, together with the Chemical Laboratory, will be open for the use of the respective classes.

The Students' Medical and Chirurgical Society will hold its meetings every Thursday evening, and the Library will be constantly accessible to the Members. Medals will be given at the end of the Sessions.

ROYAL DISPENSARY AND INFIRMARY.

Physicians.—J. Mitchell, E. Lyon, J. L. Bardsley, J. D. Hulme, P. Wood, J. Pendlebury. *Surgeons.*—J. Ainsworth, R. Thorpe, W. J. Wilson, T. Turner, J. Jordan, T. Fawdington. *Visiting Apothecaries.*—J. Cooke, J. R. Lynch. *Resident Officers.—House Apothecary*—S. Gaskell. *House Surgeon*—W. Smith. *Clerks to the Physicians*—J. Harrison, J. Wood, W. Furnival. *Secretary*, F. A. Walsh.

June, 1837 to June, 1838. In-patients, 1,926; Out-patients, 12,542.—Home-patients, 4,065; Out District Home-patients, 809. Out of the above there were 3,584 cases of accident.

Expenditure.—Dispensary and Surgery, 2,782*l.*—House, 2,861*l.*—Salaries, 1,217*l.*—Stationery, 226*l.*—Articles of annual consumption, 375*l.*—Miscellaneous, 663*l.*

MANCHESTER AND SALFORD LOCK HOSPITAL.

Consulting Surgeon.—J. Jordan. *Surgeons.*—E. Blackmore, G. Plant. *Assistant Surgeon and Secretary.*—G. Daniel. No report of cases treated received. (1838.)

A MEDICAL SOCIETY

Was established in 1834, which at present enrols as its members nearly all the respectable practitioners of Manchester and the surrounding towns. Papers on subjects connected with the profession are read and discussed by its members every fortnight. Connected with the Institution is a Medical Library, which is daily becoming more valuable.

LUNATIC HOSPITAL AND ASYLUM.

Medical Officers the same as those of the Infirmary.

1837-38.—Expenditure 2228*l.*, of which 1735*l.* were received from the friends of patients.

Patients, June, 1837-38. Admitted, 15; in the house, June 24, 1837, 45; cured, 9; relieved, 1; at friends' request, 4; dead, 1; in the house, 45.

THE BOARD OF HEALTH, OR FEVER WARDS, OR HOUSE OF RECOVERY.—1795.

Medical Officers same as those of Infirmary.

Admitted.—1835, 390; deaths, 1 in 7. 1836, 582; deaths, 1 in 5½. 1837, 777; deaths, 1 in 6⅔. 1835, scarlet fever, 47; small pox, 13. 1836, scarlet fever, 31; small-pox, 37. 1837, scarlet fever, 5; small-pox, 8.

Expenditure, 1 year, 944*l.* 15*s.* 8*d.*

SALFORD AND PENDLETON ROYAL DISPENSARY.—1827.

Physicians.— Harland, R. Hardy. *Surgeons.*—J. Boutflower, G. Gardom, T. Brownbill, T. Slack. *Visiting Apothecary.*—J. Sharp. *House Apothecary.*—G. Southam.

1837-38. In-patients, 1552; out-patients, 3980. Out-patients dead, 24; in-patients, 24. Inoculated for cow-pock, 67.

Expenditure,743*l.*; drugs, 208*l.*; trusses, 12*l.* 13*s.*; leeches, 51*l.*

CHORLTON-UPON-MEDLOCK DISPENSARY.—1825.

Consulting Physician. — S. Bardsley. *Physicians.* — J. Pendlebury, G. A. Chaytor. *Surgeons.*—J. E. Partington, W. Johns, M.D. *Visiting Apothecary.* —T. Standring. *House Apothecary.*— J. Hatton.

1837. *Admitted*, 1918, including 220 accidents; 31 vaccinations; 8 were sent to the fever wards, and 64 died.

Expenditure, 586*l.* Drugs and leeches, 84*l.*

ARDWICK AND ANCOATS DISPENSARY.

Physicians. — F. Hardy, J. B. Bradley, M.D. *Consulting Surgeon.*—T. Turner. *Surgeons.*—H. W. Kerr, Lewis. *House Surgeon.* — T. Hudson, Salary, 80*l.* *Visiting Apothecary.*—Danson.

June, 1836-37. *Admitted.*—Home-patients, 688; remaining on books, June, 1836, 64. Sent to fever wards, 13; dead, 54; remaining on books, 178. Out-patients.—Remained on books at last Report, 158. *Admitted since*, 798, of whom 9 died. Independent of these cases there were 845 accidents. Since the opening of the Dispensary in 1828, there have been admitted 6769 home-patients, and 10,243 out-patients; 6759 accidents; and 385 have been vaccinated.

Expenditure for 12 months, 280*l.*; drugs, leeches, instruments, &c. 85*l.* 16*s.*

MANCHESTER EYE INSTITUTION.

1815.

Consulting Physician.— Robinson. *Surgeons.*—S. Barton, J. Windsor. *Assistant Surgeons.*—R. T. Hunt, J. Walker.

Jan. 1, 1837, to Jan. 1, 1838. *Admitted*, 1486; remaining on the books at last Report, 400. Total, 1886. *Discharged.*—Cured and relieved, 1290; incurable, 50; absented, 95; on the books, 451. Operations for cataract and artificial pupil, 12. Total patients since 1815, 28,644.

Expenditure in 12 months, 303*l.* For medicines, leeches, and spectacles, 82*l.* 7*s.*

MANCHESTER AND SALFORD LYING-IN HOSPITAL.

The class of patients at this hospital are home-patients; those attended at their own homes in labour, out-patients; women affected with diseases peculiar to females; and children under two years of age, who attend at the hospital twice a week.

Physician.—R. Agnew. *Surgeons Extraordinary.* — Thorpe, Radford, Fawdington. *Surgeons.* — R. T. Hunt, E. Stephens, J. Bryden. *Surgeons for Out-Districts.* — D. Lynch, J. Wood, J. Kenworthy, Jun. *Apothecary and Secretary.*—J. H. Brown. Salary, 40*l.*

Admitted, May 2, 1837, to May 2, 1838.—Remaining on the books, 1837, 158. Home-patients. *Admitted since*, 3326.—Women delivered and *discharged*, amongst whom were 64 twin cases, 3219; remaining on the books, 1838, 265. Out-patients. Remaining on the books, 1837, 35. *Admitted since*, 41; cured, 49; remaining, 49. Inoculated for cow-pock, 330. Total patients this year, 3697.

Expenditure in 12 months, 134*l.* 10*s.* 10*d.*

GENERAL DISPENSARY

For Children under 14 Years of Age.

1829.

Physician.—J. Alexander. *Surgeon.*—W. B. Stott.

February 1836—1837.

Patients admitted, 1140; on the books, Feb. 1st, 1836, 173. *Discharged.*—Cured, 801; relieved, 78; irregular, 92; incurable, 15; dead, 64; on the books, Feb. 1st, 1837, 219.

The expenditure for the last year, according to the Report, was 108*l.* 12*s.*; add to this, debts owing, 61*l.* 10*s.*

THE LITERARY AND PHILOSOPHICAL SOCIETY OF MANCHESTER has been long known and duly appreciated by the public; having been established as early as 1781. It consists of ordinary, honorary, and corresponding Members, who pay 2*l.* 2*s.* on their admission, and an annual subscription of 1*l.* 1*s.* Mr. Dalton, F.R.S., is President of the Society. A "Volume of Transactions" is annually published."

THE ROYAL INSTITUTION was instituted in 1823, for the cultivation of literature, science, and the fine arts, and is directed by a president, twelve vice-presidents, and a committee chosen from the body of hereditary members.

THE NATURAL HISTORY SOCIETY OF MANCHESTER MUSEUM, situated in Peter-street, has been celebrated for the extent and beauty of its collection of birds. The mineralogical and geological collections are also extensive and varied.

THE PHILOLOGICAL SOCIETY, consisting of thirty resident and fifty corresponding members, was instituted in 1803.

THE BOTANICAL AND HORTICULTURAL SOCIETY possesses a garden extending over sixteen acres of ground, which is stocked with many choice medical plants.

THE MECHANICS' INSTITUTION, founded in 1824, at present enrols 1526 members. The main objects of the Institution are the delivery of courses of lectures on popular subjects—privately educating its operative members. The library consists of 3595 volumes. Attached to the Institution is a Mutual Improvement Society, at which papers on scientific subjects are read and discussed. In 1834 a school, conducted on the plan of the Sessional School in Edinburgh, was established for the education of boys and girls. In 1835 the income amounted to 273*l.* 14*s.* 7*d.*

THE ATHENÆUM, an Institution for literary, political, and scientific uses, was established in October, 1835. The subscription is 30*s.* per annum.

THE PORTICO combines the advantages of a news-room and library, which contains 10,000 volumes.

THE MANCHESTER SUBSCRIPTION LIBRARY, established in 1765, contains 18,000 volumes. Besides this, there are numerous general libraries throughout the town.

The School for the DEAF AND DUMB is supported by subscriptions and donations. Children from 9 to 14 years of age, of sound intellect, are eligible to its benefits. The number of pupils in the school in 1835 was 47; the expenditure, 1142*l.* 15*s.* 9½*d.*

There is a BLIND ASYLUM attached to the Deaf and Dumb School, which, when finished, will accommodate about 150 inmates.

Margate.

ROYAL SEA-BATHING INFIRMARY.—1794.

Physician.—J. Conham. *Consulting Surgeon.*—J. Wadlington. *Resident Surgeon.* W. O. Chalk. *Secretary.*—J. Rainbow, 16, Walbrook, London. (1836.)

Newcastle-upon-Tyne.

INFIRMARY.—1751.

Physicians.—T. E. Headlam, N. T. Smith, D. Bulman, D. B. White. *Consulting Surgeon.*—T. Leighton. *Surgeons.*—J. Baird, J. Fife, T. M. Greenhow, H. Heath. *House Surgeon.*—J. P. Church. Salary, 60*l.*

There are a Literary and Philosophical Society, with above 650 members; a Natural History Society, the museum of which contains extensive geological specimens, and perhaps the best collection of British birds in the provinces; an Antiquarian Society, which is flourishing; and a Mechanics' Institution. A Society for the Promotion of the Fine Arts is being established; and it is now in contemplation to form a Zoological Society, and Botanical Gardens.

DISPENSARY.—1837.

Physicians.—Headlam, Smith, Bulman, Wightman, White, Cargill. *Surgeon.*—Hawthorn. *Resident Surgeon and Apothecary.*—J. Wilkie.

FEVER HOSPITAL.—1804.

Is attended by the medical officers of the Dispensary, and supplied with medicine from the same Institution.

EYE INFIRMARY.

Surgeons.—T. M. Greenhow, J. Fife.

March, 1836-37. Patients discharged, 916; cured, 850; remain, 148. Expenditure, 267*l.*

LYING-IN HOSPITAL.—1760.

Physicians.— Smith, Bulman. *Surgeons.* —S. M. Frost, Wm. Hardcastle, W. Nesham.

The Self-Supporting Dispensary within the precincts of the Town is answering the purposes intended by its founders.

SCHOOL OF MEDICINE AND SURGERY.

Anatomy and Physiology.—W. Morrison. *Anatomical Demonstrations.*—W. Dunning. *Medicine.*—M. H. Lynch. *Chemistry.*—H. G. Potter. *Midwifery.*—W. Dawson. *Surgery.*—J. Fife. *Materia Medica.*—T. Fenwick, Elliott.

The Anatomical Museum and Cabinet of Materia Medica are open during certain hours to the inspection of students.

Spring courses are delivered on Medical Jurisprudence, Botany, Midwifery, &c., Practical Anatomy, and Practical Chemistry.

GATESHEAD DISPENSARY.—1812.

Physicians. — Headlam, Smith, White. *Surgeons.* — H. Brady, R. Davis, F. Bennett. *Apothecary.*—J. H. Hedley. Salary, 80*l.*

Feb. 1836-37.—Patients admitted, 1202; and Casualties, 3538. Exclusive of casualties;—cured, 1018; died, 62. Mean number remaining, 128. Of 138 cases of fever, 121 cured, 5 died, 12 remain. Small-pox, 46 cases; 6 died, 3 remain, 37 cured. Expenses, 317*l.* 17*s.*

The *Medical and Surgical Society* has about fifty members. Meetings once a month. There are also two or three others of about twelve members each.

SOUTH SHIELDS DISPENSARY.
1821.

Consulting Physician.—J. Brown, 1833. *Surgeons.*—J. Hedley, 1821; J. Tosach, 1821; H. Bowlby, 1834. *Apothecary.* —C. Harrison, 1835.

Patients in 1836-37, 653. Accidents, 96.

SUNDERLAND AND BISHOPWEARMOUTH INFIRMARY, DISPENSARY, AND HOUSE OF RECOVERY FOR FEVER.—(United Institution.) Beds, 20.

Physicians.—W. R. Clanny, 1806; J. Miller, 1817; J. Brown, 1822: H. Ogden, 1832. *Surgeons.*—G. Atkinson, 1800; J. Croudace, 1808; C. Fergusson, 1820; W. Mordey, 1832. *House Surgeon.*—T. Penman, 1834. Salary, 100*l.* Duties, visiting out and in-patients, &c.

There are a Medical Society, a Medical Library, a Literary and Philosophical Society, a Public Library, and a Natural History and Antiquarian Society, in the town.

An Infirmary for diseases of the eye has been established. 1836.

Surgeons.—E. H. Maling, W. J. Dodd.

Northampton.

GENERAL INFIRMARY.—1744.

Physicians.—A. Robertson, 1823; W. C. Kerr, 1823. *Surgeon Extraordinary.*—H. Locock, 1793. *Surgeons.*—W. Percival, 1820; H. Terry, 1827. *House Surgeon and Apothecary.* — J. Mash, 1815. (1835.)

Norfolk.

NORFOLK AND NORWICH HOSPITAL.—1771.

Physicians.—W. Wright, E. Evans, L. Lubbock. *Surgeons.*—W. Dalrymple, J. G. Crosse, B. H. Norgate. *Assistant Surgeon.*—I. G. Johnson.

THE LYNN AND WEST NORFOLK HOSPITAL.—1836.—Beds, 30 to 40.

Physicians.—Tweedale, Waite. *Surgeons.* —Ingle, Whiting.

NORWICH AND NORFOLK UNITED MEDICAL BOOK SOCIETY has been instituted twelve years, and has varied in the number of its members from 60 to near 100. The object in view is the circulation of medical books, and establishing a permanent library. The Society is divided into four districts, and four copies of each new work are purchased, one for each district; every member of the Society thus receiving the books in circulation.—(1836.)

Nottingham.

GENERAL HOSPITAL.—1782.
Beds, 106.

Physicians. — J. M. Davidson, 1826; G. Howitt, 1830; R. S. Hutchinson, 1832. *Surgeons.*—J. Attenburrow, 1781; W.

Wright, 1818; G. M. White, 1835. *House Surgeon and Apothecary.*—F. Sibson, 1836. Salary, 150*l.* Admission day, Tuesday.

The Library of the Medical Book Society contains 1000 volumes.

DISPENSARY.—1831.

Physicians.—Howitt, J. C. Williams. *Surgeons.* — R. Davison, A. Greeves, T. Allen, J. Thompson. *Resident Surgeon.* —T. Wilson, 1836.

GENERAL LUNATIC ASYLUM.—1812.

Physician.—A. Blake. *Surgeon.*—White. June, 1836-7, (one year)—Admitted, 60. Average number resident through the year, 129½. Total ordinary expenditure, 4168*l.*; repairs and clothing, 712*l.*

MEDICAL SCHOOL.

This school was established in 1833, under the patronage of the Duke of Newcastle, Lord Lieutenant of the County, who gave 500*l.* towards it.

Lecturers.

Anatomy and Physiology.—G. M. White, Caunt. *Practice of Physic.*—J. C. Williams. *Anatomical Demonstrations.*—J. Thomson. *Midwifery.*—J. Wright. *Medical Jurisprudence.*—C. Attenbrow.

NOTTINGHAM AND NOTTINGHAMSHIRE SOCIETY FOR THE STUDY AND CULTIVATION OF NATURAL HISTORY.—1836-7.

Patron.—The Duke of Newcastle, Lord Lieutenant of the county.

President.—Rev. J. Wolley.

Council.—J. J. Bigsby, Rev. B. Carpenter, C. Churchill, D. S. Churchill, J. M. Davidson, R. Davison, F. P. Hewitt, Higginbottom, Riley, F. Sibson.

Honorary Curators.

Zoology, B. Eddison. *Ornithology*, J. C. Williams. *Entomology*, R. Bakewell. *Botany*, Howitt. *Geology and Mineralogy*, A. F. A. Greeves.

Secretaries.—Rev. W. J. Butler, M. Browne.

There is a *Literary and Philosophical* Society (1824) at Nottingham.

1835—Members, 103. Expenditure in the year, 54*l.* 12*s.*

Oxford.

RADCLIFFE INFIRMARY, was built and completely furnished at the sole charge of the Executors of Dr. Radcliffe, and opened for the reception of patients on the 10th of October, 1770.

Physicians.—J. A. Ogle, 1824; J. Wootten, 1830; C. J. Bishop, 1830. *Surgeons.*—G. Hitchings, 1811; C. L. Parker, 1836; W. Cleobury, 1815; C. Wingfield, 1817. *Apothecary.*—E. Hagley, 1810.

The physicians attend on Tuesdays, at noon, to prescribe for the out-patients of the town, and on Sat. to meet the out-patients from the country. The surgeons generally attend daily, at noon. The day of admission is W. at 12 o'clock. Dr. Ogle, Clinical Professor, lectures from November to March, three times a week.

RADCLIFFE LUNATIC ASYLUM.—Headington-hill.—1826.

Physician and Treasurer.—J. A. Ogle. *Consulting Surgeon.* — W. Tuckwell. *Resident Surgeon, Apothecary, and House Director.*—F. T. Wintle.

MEDICAL DISPENSARY AND LYING-IN CHARITY. — Beaumont-st. 1807.

Surgeon and Accoucheur.—J. Symonds.

1834.—Patients admitted, 1004; dead, 23. Patients in midwifery, 157. Expenditure 308*l.*, of which Mr. Symonds received 206*l.* Medical cases since 1807, 19,830; midwifery cases, 2767.

Rochester, Chatham, and Strood.

DISPENSARY.—1831.

Physician.—J. Anderson, 1834. *Surgeons.* —A. Martin, 1831; W. Bell, 1831; W. Stephenson, 1834. *Dispenser.*—T. Dove. 1831.

Total admitted from commencement, 5364. 1838. Admitted, 833; cured, 788; relieved, 27; dead, 17.

Salisbury.

INFIRMARY.—1767.

Physicians.—Fowler, 1796; Grove, 1817, *Surgeons.*—H. Coates, 1804, J. Andrews. 1807, G. Sampson, 1827. *House Surgeon and Apothecary.*—Tatum, 1833.

1833-34.—In-patients, 887; out-patients, 1213; Total, 2100. (1835.)

Annual expenditure about 2700*l.*

Salop.

SALOP INFIRMARY.—1747. *Physicians Extraordinary.*—J. Evans, R. W. Darwin. *Physicians.*—T. Du Gard, J. P. Johnson, H. Johnson. *Surgeon Extraordinary.*—E. Humphreys. *Surgeons.*—H. Keate, H. E. Burd, J. Dicken, *House Surgeon and Apothecary.*—S. Wood; salary, 100*l.* a year.

A Library is attached to this hospital. Surgical pupils pay the surgeons twenty guineas annually. Two apprentices are taken into the house. No Clinical Lectures have yet been delivered. Patients are admitted on S., and seen by the Medical Officers on M. and Th.

Sheffield.

SHEFFIELD GENERAL INFIRMARY.—1797. 100 Beds. *Honorary Physician.*—A. J. Knight. *Physicians.* W. Young, C. Thompson, G. C. Holland. *Honorary Surgeon.*—J. Favell. *Surgeons.*—H. Thomas, W. Overend, H. Jackson. *House Surgeon.*—R. Ernest; salary 100*l.* a year, and part of the apprentices' fees.

The pupils are generally apprentices of the medical officers. There is a small Library of old works. Clinical Lectures by Dr. Thompson and Dr. Holland.

There is a Medical Society in Sheffield. The Library contains about 1000 vols. (1835.)

Stamford.

STAMFORD AND RUTLAND INFIRMARY.—1828. Founded on the donation of the late H. Fryar, Esq. *Physicians.*—T. G. Arnold, W. L. Hopkinson. *Surgeons.*—J. G. De Merveilleux, M. W. Jackson, W. Burdett, W. Whitby, E. Hatfield. *Consulting Surgeon.*—B. Cowper. *House Apothecary and Surgeon.*—E. Brown; salary, 100*l.*

Beds, 20. About one in four of the patients admitted in 1835 were from Stamford, the remainder from the neighbouring country. Admission-day on Tuesday. Out-patients attend on Friday.

There is a small library, only recently established.

Stafford.

GENERAL INFIRMARY.—1766. *Physician.*—E. Knight. *Surgeons.*—R. Hughes, 1817; J. Masfen; R. Hughes. *House Surgeon, Apothecary, and Secretary.*—E. S. Hare. 1836. Expenditure, 2936*l.* Beds, 100. Average number of in-patients, 67.

COUNTY LUNATIC ASYLUM. *Physician.*—E. Knight. *Resident Apothecary, Surgeon, and House Director.*—H. Garratt. Average number of patients, 220.

NORTH STAFFORDSHIRE INFIRMARY.—1815. (Near Newcastle-under-Lyne.) *Physician Extraordinary.*—F. H. Northen. *Physicians.*—T. Mackenzie, E. Wilson. *Surgeons.*—G. Wood, J. Spark, D. Ball. *House Surgeon and Secretary.* H. Davies.

Surrey.

"From the immediate contiguity of thi county to the Metropolis, the gentleme of the medical profession residing in it and more especially those in the nea vicinity of town, look to London for ever thing of a public nature; and the mas of the population equally look to th London Hospitals for aid in cases tha are appropriate for reception into suc institutions. There is, therefore, no hos pital in the county out of Southwark."

The following Society, however, i highly creditable to the spirit and inte tions of the medical practitioners Surrey.

SURREY BENEVOLENT MEDICA SOCIETY.—Instituted in 1812, for th purposes of establishing a Benevole Fund, the promotion of sentiments friendship, and mutual information i medical and chirurgical science. Mee ings twice a year, at Epsom, Croydo or Reigate. *President.*—T. Martin, Reigate. *Vice-Presidents.*—E. Wallac G. Fletcher. *Trustees of the Fund.*— E. Wallace, G. Fletcher. Dr. Hardwic J. N. Shelley. *Secretary.*—Peter Marti

Admission fee, 3*l.*; annual subscri tion, 2*l.*, to be paid not more than twent five years.

The fund for benevolent purposes n amounts to 3,300*l.*

Taunton.

TAUNTON AND SOMERSET HO PITAL.—1809. *Physicians.*—E. Eve, 1830; T. Woodforde, 1832. *S geons.*—H. Alford, 1830; J. Wi 1830; R. P. Welch, 1831. *House A thecary.*—C. N. Cornish, 1834; sala 60*l.* *Consulting Surgeon.*—J. Billet.

YE INFIRMARY.—1816. *Surgeon.*—J. Billett.
March, 1835-6, patients admitted, 486; Iarch, 1816-1836, admitted, 7364.

Warrington (Lancashire.)

ARRINGTON DISPENSARY.—1810. *Consulting Physician.*—Kendrick. *Physicians.*—Moss, Churton. *Consulting Surgeon.*—Morley. *Surgeons.*—Sharp, Hardy. *Resident Apothecary and Surgeon.*—Robson. (1836.)

Warwick.

DISPENSARY.

hysicians.—Conolly, Luard. *Surgeons.*—Hiron, Wilmshurst, Jaggard. *Dispenser.*—Wilmshurst.

ARWICKSHIRE NATURAL HISTORY AND ARCHÆOLOGICAL SOCIETY.—1836. *resident.*—C. Leigh. *Honorary Secretaries.*—J. Conolly, J. Twamley. *Honorary Curators.*—G. Lloyd, H. Blenkinsop. (1836.)

Weymouth.

ISPENSARY AND ROYAL INFIRMARY.—1816. *Consulting Physician.*—Sir J. Mead, *Surgeons.*—A. Larkworthy, jun., S. S. Scriven.

Report.—Patients admitted from Oct. , 1835, to Sept. 16, 1836, 196; received nce the commencement in Oct. 1816, to pt. 16, 1836, 4084.

EYMOUTH AND DORCHESTER MEDICO-CHIRURGICAL BOOK SOCIETY. *President*—Dr. Jackson. *Treasurer.*—G. A. Ellis. *Honorary Secretary.*—J. P. Aldridge.

No other medical institutions exist in rsetshire.—(1836.)

Whitehaven.

INFIRMARY.

nsulting Physicians.—R. Falcon, and J. Stanley. *Surgeon for Life.*—Dawson. *Surgeons.*—Fox, Thompson, Mitchell, Wylie, Mossop, Burns, Wilson, King. *House Surgeon.*—J. Hodgson.

The Surgeons attend daily from eleven one o'clock. Two of them take this ty monthly in rotation.

Jan. 1, 1837, 1838. Recommended and registered, 1390, Trivial Incidents, 1167.

State of the Register including 93 remaining at the last annual meeting:—

Cured, 1306; Relieved, 20; Incurable, 16; Dead, 75; Remaining on the Register, 76.

DISPENSARY, 1783.—FEVER HOUSE, 1818.

In May, 1830, the two were incorporated, and are now called "*Whitehaven Infirmary and Fever House.*" Open daily from 11 to 1; contains 45 beds: attached is an extensive Dispensary practice. Expenditure in 1835, 320*l.*

State of Registry in 1835:—Patients recommended, 1356; trivial incidents, 2284; dead, 64; remaining on Register, 74.

Consulting Physician.—R. Falcon, 1830. *Surgeons for Life.* — E. Dawson, 1830; J. Robinson, 1830. *Assistant Surgeons.*—E. Thompson, T. Mitchell, M. Wylie, J. Mossop, J. Burns, J. Wilson, and R. F. King. *House Surgeon.*—J. Hodgson. Taken from Report of 1835.

Winchester.

COUNTY HOSPITAL, 1736.

Physicians.—E. Philips, J. Harris. *Consulting Surgeons.*—G. K. Lyford, W. N. Wickham. *Surgeons.*—C. Mayo, H. G. Lyford, W. J. Wickham. *House Surgeon and Apothecary.*—J. Crouch, 1830-34.—(1836.)

Worcester.

GENERAL INFIRMARY.—1745. Beds. 100. *Physicians.*—J. Malden, 1818; C. Hastings, 1818; J. Nash, 1826. Attend every Wed. and S. at 11. *Surgeons.*—J. Shepherd, 1819; M. Pierpoint, 1819; T. Carden, 1819. *House Surgeon and Apothecary.* — H. Cole, 1815; salary, 80*l.*

No lectures of any kind are delivered. Fee for medical pupils, 20g. per ann.; fee for surgical pupils, 30g. per ann. No library, but a small museum of morbid preparations. Patients: admission-day, S. at 11. The number of country patients in proportion to the town is as 8 to 6.

There are two *medical societies* in Worcester: the *Medical Book Society*, consisting of 13 members, *secretary*, Mr. Sheppard. The *Worcestershire Medical Society* has 20 members; *secretary*, Mr. Morris. Members are not confined to the town of Worcester, but reside in different parts of the county. Books circulate among them.

DISPENSARY. 1822.

Physician Extraordinary.—J. Malden, 1834. *Physicians.*—C. Hastings, 1822; R. J. N. Streeten, 1826; J. J. Feild, 1834. *Surgeons.*—E. Morris, 1822; J. Greening, 1822; W. Jones, 1834. *Visiting Apothecary,* &c.—Richard Hill, 1824. Salary 60*l.*

WORCESTERSHIRE NATURAL HISTORY SOCIETY.

Officers appointed for 1837.

President.—The Lord Bishop of Worcester.
Hon. Curators.—F. A. Walter, Esq., J. J. Feild, M.D.
Treasurer and Hon. Secretary.—John Evans.

LITERARY AND SCIENTIFIC SOCIETY.

Number of members, 200; it has published nothing, but has a library to circulate books among the members.—(1835.)

Wrexham.

DISPENSARY. 1833.

Consulting Physician.—Parker. *Surgeons.*—H. Hughes; G. Lewis; T. T. Griffith; V. P. Royle. *Dispenser and Secretary.*—D. Thomas.

The self-supporting department does not fully answer the purposes anticipated; many entering during sickness, and ceasing to subscribe when they have got a cure.

Medical Statement: Patients admitted the first year, 809. Second ditto, 923. Third ditto, May, 1835-36, 1013.

Payments last year: Drugs and leeches, 101*l.* 16*s.*; surgical instruments, &c., 17*l.* 1*s*; dispenser's salary, one year, 60*l.*; to the medical officers, 7*l.* 16*s.*; other expenses, 65*l.* 1*s.* Total 251*l.* 14*s.*

York.

COUNTY HOSPITAL.—1740.

Physicians.—B. Wake, 1809; H. S. Belcombe, 1832. *Surgeons.*—G. Champney, 1813; H. Russell, 1834. *House Apothecary and Surgeon.*—T. Laycock; salary 60*l.*

The Library contains about 1000 vols., and there is a Museum just formed. Clinical Lectures are given by Wake and Belcombe once a week. Medical and surgical pupils, perpetual fee for attendance, 25g.

MEDICAL SOCIETY.—1832.

President.—Mr. Swineard.

17 Members. A Circulating Medical Library is connected with the Society. (1836.)

SCHOOL OF MEDICINE.

Anatomy, Physiology, and *Pathology.*—Hopps lectures. *Demonstrations.*—Hopps. *Surgery.*—Champney, Henry Russell. *Materia Medica.*—Needham. *Chemistry.*—T. Tate. *Medicine.*—Simpson. *Botany.*—Rev. W. Hincks. *Medical Jurisprudence.*—Belcombe. *Midwifery.*—J. Allen, W. Anderson.

Clinical Lectures will be given to the pupils of the hospital.

YORK LUNATIC ASYLUM.

Physician.—Wake. *Apothecary.*—T. Ellis.

Net expenditure in the year ending May 31, 1836, 5592*l.* Revenue, 8086*l.*

THE RETREAT FOR LUNATICS.—1796.

Number of patients in the house, 1836, 96. Total number treated since commencement to end of 1835, 508. In the year ending March 31st, 1836, Revenue, 3848*l.* 2*s.* 10*d.*

Physician. — H. S. Belcombe. *Resident Surgeon.* — J. Thurnam. *Superintendent.*—T. Allis.

MEDICAL CHARITABLE SOCIETY FOR THE WEST RIDING OF THE COUNTY OF YORK.

Next Meeting to be held at Bradford.

President.—Dr. Thorp, *Leeds.*
Vice-Presidents.—Dr. Favell, *Sheffield;* Dr. Thomas, *Wakefield;* Dr. Scholefield, *Doncaster;* Dr. Outhwaite, *Bradford;* Dr. Moulson, *Halifax;* Mr. Richardson, *Harrogate;* Mr. Hare, *Leeds;* Mr. Simpson, *Skipton.*
Treasurer.—William Hey, Esq., *Leeds.*
Secretary.—Mr. Garlick, *Leeds.*

35 Stewards are also appointed.

The Society comprises between 200 and 300 subscribing members, chiefly, but not exclusively, of the Medical Profession. It has received several donations; and as it appears that the property of the Society may amount to the required sum of 2000 before the Annual Meeting, July, 1837, applications for relief will be received at that meeting. The funds have been accumulating for eight years.

The Society is established for the relief of widows and orphans of Medical Men dying in exigent circumstances, an for the benefit of Practitioners in a state of poverty, being at the same time incapacitated by age or bodily infirmity. All benefactors of 10g., or subscribers of 1g. annually, being *regular* Practitioners, are members of the Society, and no annual subscription of a Member can exceed 1g. (1836.)

DONCASTER DISPENSARY.—1792.

Consulting Physician.—Dr. Robinson.—*Physician.*—Dr. Scholefield. *Consulting Surgeon.* — J. Branson. *Surgeons.*—Moore, Morcy, Storrs, Holbrey. *Apothecary and Secretary.*—G. Loxley. Oct. 1834-5, one year, 1561; died, 67; expenditure, 447*l.* (1836.)

WALES.

Abergavenny.

DISPENSARY.—1828.

Surgeons.—C. M. Ashwin, T. Batt, T. Steele, W. Steele.

The medicines are supplied by a druggist. (1836.)

Brecon.

BRECKNOCK COUNTY AND BOROUGH GENERAL INFIRMARY. —1834.

The House will accommodate 35 patients; but no more than 6 beds are at present made up.

Consulting Physician.—H. Lucas, 1835. *Physicians.*—W. Wynter, 1835; H. J. Lucas, 1835. *Surgeons.*—T. Batt, 1833; T. Armstrong, 1833. *House Apothecary.*—J. North, 1833. Salary, 40*l.*

Swansea.

INFIRMARY.—1836. Beds, 18.

Honorary Physician.—J. Gibson, 1822. *Physicians.*—Howell, 1831; Cohen, 1835. *Surgeons.*—G. G. Bud, 1825; W. Roland, 1832. *House Surgeon.*—L. F. Mortimer, 1835.

HEALTH ASSURANCE SOCIETIES, AND SELF-SUPPORTING DISPENSARIES.

A great number of these Institutions are forming in different parts of the country, Mr. Smith states that "above a hundred new Clubs and Dispensaries have been founded in the past year." Among the earliest and most extensive Dispensaries may be mentioned those of Southam, Burton-upon-Trent, Coventry, Birmingham, Walsall, Derby, Rugby, Lymington, and Wellesbourne. Some of the Regulations and Reports are before us; but for want of documents, we can only give an account of the following.

COVENTRY BENEVOLENT OR SELF-SUPPORTING DISPENSARY.—1831.

Consulting Physician.—R. Arrowsmith; attending in consultation at the request of the surgeons, elected in 1831. *Surgeons.*—C. C. Nankivell, E. Bicknell; attend on alternate days at 10 A.M., elected in 1831. *Dispensary.*—D. S. Whitehead.

March, 1837.—Patients attended from March 1836, 1610; cured, 1430; died, 28; vaccinated, 126; cases of continued fever, 38; patients visited in the town only.

Receipts from free members, 392*l.* 2s.; paid from this fund towards the Dispenser's salary, 40*l.*; for medicines, 90*l.* 7s.; to the two surgeons, 261*l.* 10s. Receipts from honorary funds, 106*l.*; of this 90*l.* was expended, in 20*l.* to the Dispenser, and the remainder defrayed the other expenses of the establishment, leaving a surplus of 16*l.*

CROYDON AND NORWOOD SELF-SUPPORTING DISPENSARY. 1835.

Medical Officers.—Thomas, Chalmers, G. Fletcher, C. Bottomley, F. Harris, J. Bird, E. Westall, J. Neville, Toldervy, G. Drummond. *Apothecary.*—T. B. Toovey.

March, 1835-6, (one year.)—335 members admitted, 234 remain on the register; 205 have become patients, 165 been cured, 7 died, and 33 remain under treatment. 284*l.* have been contributed to the honorary fund; the weekly payments of the members' fund amounted to 35*l.* 10s. —(1836.)

SOUTHAM DISPENSARY.

Surgeon.—H. L. Smith.

Open to persons whose earnings *individually* are not sufficient to defray the expenses of medical attendance. The annual subscription for adults is 3s. 6d ; for children, 2s. Members out of Southam pay for each journey at the rate of 2s. 6d. if within three miles, and 1s. for every mile above that distance.

Midwifery is not included in the above.

According to the second report,—Oct. 25, 1835—there were then 336 subscribers, 215 adults, and 121 children : 270 had become patients, and 8 had died. The subscriptions from the members amounted to 44*l*. 12s., the fees for journeys to 26*l*.—(1836.)

SOUTHAM EYE AND EAR DISPENSARY.—1818.

Physicians.—C. Wake, P. F. Luard, A. Middleton, J. Rann, A. Robertson, J. Connolly. *Surgeon.*—H. I. Smith.

"The distinguishing feature of this Infirmary is the self-support of the in-patients." Men pay 6s., women, 5s., children, 4s. or 3s. 6d. per week for their board.

BURTON-UPON-TRENT SELF-SUPPORTING DISPENSARY.

Burton-upon-Trent, in Staffordshire, with a population of only 3400, possesses an institution of this kind, which has 2207 members, and a reserve fund of 100*l*. It is giving the highest satisfaction both to rich and poor, In 1835, the total number of members—men, women, and children—was 2207, and the sick attended were 1131.—*Dr. Bigsby on Dispensaries.* 1836.

BARHAM DOWNS MEDICAL PROVIDENT SOCIETY.—Established, in 1834, by the Rev. Charles Oxenden.

President.—J. P. Plumtre, M.P., *Treasurer.*—Rev. C. Oxenden.

Medical Men to whom the members may apply for advice—Chalk, Long, Pittock, Sicard, Elgar, Mackeson, Sankey, Soulby, Everest. Any other medical man may be added to the list by complying with the rules.

The number of Benefiting Members for the year ending Sept. 30, 1836, was 1480.

The Society consists of honorary and benefiting members: the latter of (1) *domestic servants* of farmers, or of other persons in or retired from business, (2) journeymen, (3) apprentices, (4) labourers, (5) boys and girls, (6) single women and widows. A scale of monthly and yearly payments has been fixed for each class ; for example, servants pay 9d. a month, o 8s. (in advance) for the whole year; journeymen, 10d a month, or 9s. a year, &c. The medical men make out their bills according to a printed form, and a fixed scale of charges.—(1836.)

MANCHESTER AND SALFORD LOCK HOSPITAL.—1819.

Physician.—Hall. *Surgeons.*—Blackmore, G. Plant. *Assistant Surgeon.*—G. Daniel.

No report issued since 1835. In 183 admitted in-patients, 82; out-patients 388. Expenditure, 272*l*. 12*s*. 3*d*.

HULME DISPENSARY.

Surgeons.—Booth, White.

In the report of 1835, it is said that 50 were treated during the year ; the annua expenditure was 146*l*. 19*s*.

From the report of the HUMANE SOCIETY it appears that during the year 1836 the number of casualties that came under the cognisance of the Institution, were 64, and the fatal cases 11. The expenditure during the year was 36*l*. 13*s*. 8*d*.

The patients admitted in one year at the different Charities, amount to *thirty-eigh thousand four hundred and ten*, (30,00 after correction of 29 per cent. for tw classes, in, out, and home patients, or Institutions, and those remaining which are counted twice.) Taking the population of Manchester and its environs according to the census of 1831 as 270,961, i follows that one out of every seven [10? inhabitants, annually receives the benefi of a medical charity.

The annual expenditure of the medica charities *alone* is 12,510*l*., which is raise by the subscriptions of the benevolent individuals of the town. Taking the average expenditure for each patient at th different charities of the town, we shal find that every individual receiving th benefits of a medical Institution cost 6*s*. 6*d*. [8*s*. 4*d*.]

A MEDICAL SOCIETY was establishe in 1834, which at present enrolls, as it members, nearly all the respectable practitioners of Manchester and the surrounding towns. Papers on subjects connecte with the profession, are read and discusse by its members every fortnight. Connected with the Institution is a Medica Library, which is daily becoming mor valuable.

SCOTLAND.

Edinburgh.

UNIVERSITY OF EDINBURGH.

Established 1582.

FACULTY OF MEDICINE.

Chemistry, Hope, 10 a. m. *Practice of Physic*, Home, 11 a. m. *Midwifery*, Hamilton, 3 p. m. *Botany*, Graham, 8 a. m. in summer, and 5 p. m. in winter. *Institutes of Medicine*, Alison, 8 a. m. *Anatomy and Physiology*, Monro, 1 p.m. *Natural History*, Jameson, 2 p. m. *Materia Medica*, Christison, 9 a. m. *Military Surgery*, Sir George Ballingall, 1 p. m. *General Pathology*, Thomson, 2 p. m. *Surgery*, Sir C. Bell, 10 a. m. *Clinical Surgery*, Syme, 4 p. m. *Medical Jurisprudence*, Traill, 9 a. m. in winter. and 11 a. m. in summer. *Clinical Medicine*, Graham, Alison, Christison, and Traill, in rotation, two carrying on the course at the same time, 4 p. m. *Practical Anatomy*, under the superintendence of Monro, by W. Mackenzie; and *Practical Chemistry*, under the superintendence of Hope, by K. T. Kemp.

The lectures are delivered daily on all these subjects, except on military surgery, on which there are three lectures weekly; Clinical Medicine, on which there are four; Clinical Surgery, on which there are two; and the winter course of Botany, on which there are three every week. Most of the Professors set aside their hour on Saturday for examination of their classes, the rest lecture on that day.

The Winter Session lasts six months, from the beginning of November till the end of April. The Summer Session, three; commencing in May and ending in July.

Every student before entering with any professor must procure a Matriculation Ticket, the price of which is 1*l*. This ticket entitles him to the use of the College Library during the session. The fees to most of the classes are 4*l*. 6*s*.

The Library, a general one, and particularly rich in the Medical and Physical departments, is open from nine till four. The volumes are understood to exceed 100,000. Besides the right of borrowing books, the students have the use of a spacious consulting room, which is much frequented

The Public museums are, 1. The Natural History museum, open to the Professors' pupils, at most hours; and other students, under particular regulations, may visit it occasionally; the public pay 1*s*. each visit. 2. The Anatomical museum, open to the pupils of the Professor of Anatomy; and on payment of an annual fee of 7*s*., or a composition of 1*l*. 1*s*., to all other students also. Private collections are attached to the chairs of Chemistry, Materia Medica, Institutes, General Pathology, Midwifery, Clinical Surgery, Military Surgery, Medical Jurisprudence, Botany; and most of these are of great value.

The Botanic Garden, a mile and a half from the University, occupies eleven acres. It is maintained at the expense of 1000*l*. a year. It is open from 6 a. m. to 6 p. m., to the pupils of the class, and easily accessible, without payment, to other students or the public, as occasional visitors.

The Medical Students matriculated in the session 1837-38, were 670. The Medical Graduations were, in 1838, 98; of whom 41 were Scotch; 27 English; 19 Irish; and 11 from abroad. The average number graduating during the last five years is 113.

STATUTES OF THE UNIVERSITY OF EDINBURGH, RELATIVE TO THE DEGREE OF M.D., 1833, AND STILL IN FORCE.

Sect. I. No one shall be admitted to the Examinations for the degree of Doctor of Medicine who has not been engaged in medical study for four years, during at least six months of each, either in the University of Edinburgh, or in some other University where the degree of M.D. is given; unless, in addition to three Anni Medici in an University, he has attended, during at least six winter months, the Medical or Surgical Practice of a General Hospital, which accommodates at least eighty patients, and during the same period a course of Practical Anatomy; in which case three years of University study will be admitted.

Sect. II. No one shall be admitted to the Examinations for the degree of Doctor, who has not given sufficient evidence,—

1. That he has studied, during courses of six months, each of the following departments of Medical Science, under Professors of Medicine in this or in some

other University,—Anatomy, Chemistry, Materia Medica and Pharmacy, Institutes of Medicine, Practice of Medicine, Surgery, Midwifery, and the Diseases peculiar to Women and Children, General Pathology, Practical Anatomy, (unless it has been attended in the year of extra academical study, allowed by Sect. 1.,) Clinical Medicine, three months Clinical Surgery, Medical Jurisprudence, Botany, Natural History, including Zoology. 2. That in each year of his Academical Studies he has attended at least two of the Six Months' Courses of Lectures, or one of these and two of the Three Months' Courses. 3. That, besides the Course of Clinical Medicine already prescribed, he has attended, for at least six months of another year, the Medical or Surgical Practice of a General Hospital, either at Edinburgh or elsewhere, which accommodates not fewer than eighty patients. 4. That he has attended for at least six months, by apprenticeship or otherwise, the art of Compounding and Dispensing Drugs. 5. That he has attended for at least six months the Out-practice of an Hospital, or the Practice of a Dispensary, or that of a Physician, Surgeon, or Member of the London or Dublin Society of Apothecaries.

Sect. III. No one shall obtain the degree of Doctor who has not studied, in the manner already prescribed, for at least one year previous to his graduation, in the University of Edinburgh.

Sect. IV. Every candidate for the degree in Medicine, must deliver, before the 24th of March of the year in which he proposes to graduate, to the Dean of the Faculty of Medicine,—First, A declaration that he is twenty-one years of age; and that he will not be then under articles of apprenticeship to any Surgeon or other master. Secondly, A statement of his studies, as well in Literature as in Medicine, accompanied with proper certificates. Thirdly, A Medical Dissertation in Latin or English, to be perused by a Professor, and subject to his approval.

Sect. V. The candidate must submit to be examined as to his knowledge of Latin; and the Faculty proceed to examine him, either viva voce, or in writing; first, on Anatomy, Chemistry, Botany, Institutes of Medicine, and Natural History, bearing chiefly on Zoology; and, secondly, on Materia Medica, Pathology, Practice of Medicine, Surgery, Midwifery, and Medical Jurisprudence. Students may be admitted to an Examination on the first division of these subjects, at the end of the third year of their studies. If any one, at these private examinations, be found unqualified for the degree, he must study for another year two of the subjects prescribed in Sect. II., under Professors of Medicine, in this or in some other University, before he can be admitted to another examination. Should he be approved of, he will be allowed, but not required, to print his Thesis; and, if printed, forty copies of it must be delivered, before the 25th day of July, to the Dean of the Medical Faculty. If the candidate have satisfied the Medical Faculty, the candidate shall be summoned, on the 31st of July, to defend his Thesis before the Senatus Academicus; and, finally, if the Senate think fit, he shall be admitted, on the first of August, to the degree of Doctor.

The Fee payable for a Diploma is 25*l.*

ROYAL COLLEGE OF PHYSICIANS.

Incorporated in 1681.

Resident Fellows.

President.—*W. P. Allison. *Treasurer.*—T. Spens. *Fellows.*—*J. Home, *J. Hamilton, *T. C. Hope, *A. Monro, J. H. Davidson, W. Adam, *R. Graham, R. Renton, *R. Christison, J. Abercrombie, G. A. Borthwick, W. Beilby, E. Gairdner, J. Macwhirter, T. Shortt, J. Wood, R. Poole, R. M. Hawley, J. Thatcher, *J. Thomson, R. Lewins, D. B. Reid, A. Combe, D. Craigie, J. H. Peebles, P. Fairbairn, *T. S. Traill, J. D. Hunter, W. Thomson, John Smith, R. Spittal, C. Ransford, W. Macdonald, W. Seller, J. Simpson, J. Reid, J. Spens, M. Barry, J. Moir, G. Paterson, W. Henderson, J. Marr.

Non-Resident Fellows.

Sir A. Morison, W. Fergusson, W. P. Lauder, J. G. Playfair, R. Carnegy, R. Grant, W. Gregory, J. Mackenzie, M. Robertson, J. D. Morries, J. Patterson, R. Richardson, T. B. Harness, S. Hobart, J.Tilstone, H. Atkinson, E. B. Lockyer; *R. Stevenson, Newcastle; J. Fox, Falmouth; J. Macdonnell, Belfast; A. P. Wilson, London; A. Stewart, Perth; G. Dickson; A. Keltie, Perth; G. G. B. Mill, Bath; Sir A. Wilson, Bath; M. Poole, Waterford; A. Robertson, Northampton; P. Rolland; S. M'Dowall; A Mackenzie, Madras; Sir J. M'Grigor, London; W. Gourlay; J. Cheyne, Dublin; J. Muttlebury, Bath; J. P. Johnson, Shrewsbury; D. D. Davies, Sheffield; J. Bigsby, Nottingham; W. E. Leach, London; J. Clark; J. Williamson; S. Fergusson; R. Briggs,

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* Professors in the University.

St. Andrew's; J. Bower; B. Lara, Portsea; G. Magrath, Plymouth; W. Beatty, Plymouth; A. Nicol; G. Drysdale; W. Pym, London; I. Wilson, Plymouth; Sir D. Dickson, Bath; R. J. Hume, London; J. Clark, Jamaica; J. Ramsay, Italy; J. T. B. Watt; S. Macmullen, Bridgwater; Sir J. K. Grant; J. Butter, Plymouth; W. Arnold, Jamaica; D. Campbell, Lancaster; T. Kidd; T. Magrath, Biggleswade; A. Boyle; J. Murray; J. Mellis, Calcutta; Sir A. Halliday; J. Macdonald, London; J. Price, Langollen; A. S. Home, 2nd. Dragoon Guards; P. Charles; W. Glover; J. Burnes, Bombay Army.

Resident Licentiate.— J. Sanders. *Non-resident Licentiate.*—A. Reid.

The fee to be paid by a Resident Licentiate or Fellow, is 100*l.*

The fee to be paid by a Non-resident Licentiate or fellow, is 55*l.*

ROYAL COLLEGE OF SURGEONS.

Incorporated 1778.

President.—Sir G. Ballingall. *Treasurer.*—T. Lothian, W. Nisbet, *J. Hamilton, H. Johnson, J. Walker, * J. Thomson, C. Anderson, J. Herdman, Sir W. Newbigging, J. Allen, *Sir C. Bell, L. Flanaghan, J. B. Johnston, R. Robertson, A. Gillespie, J. Wardrop, J. Abercrombie, A. Edmonston, W. Wood, J. Young, J. Bell, J. Keith, D. Hay, J. Caird, H. Spalding, R. Watson, A. M. Ross, * J. Gairdner, W. Bowie, J. Lizars, J. MacNeil, A. Hunter, D. MacLagan, J. Aitkin, T. Inglis, *W. Brown, A. Tweedie, J. Thatcher, W. Law, R. Liston, A. Fyfe, D. Clarke, W. Howison, W. Campbell, *J. MacFarlan, *A. Macaulay, R. Hamilton, A. Watson, J. A. Robertson, † J. Pitcairn, E. W. Duffin, † R. Huie, J. Begbie, † J. S. Combe, J. Russell, * J. Syme, R. Nasmyth, B. Bell, † J. Campbell, D. Johnston, G. Johnston, † A. Inglis, † W. Dumbreck, W. Thomson, R. Knox, † J. Simson, † F. Farquharson, M. Sinclair, A. Messer, A. Bryce, T. J. Aitkin, J. Murray, J. Scott, W. M. Bathgate, S. A. Pagan, G. H. Bell, H. B. Macfarlane, W. Fergusson, J. R. Sibbald, A. Warden, W. Sharpey, G. Gill, A. Miller, A. Wood, A. J. Lizars, T. Wood, A. Thomson, R. Omond, A. D. Maclagan, P. D. Handyside. J. H. Balfour, E. B. Shirreffs, P. S. K. Newbigging, B. Bell, jun., J. Duncan, W. H. Thomson, D. Skae, G. S. Newbigging, A. Cockburne.

Honorary.—Sir C. Kerr, Sir W. Franklin, Sir J. Macgrigor, Sir A. Cooper.

Professor of Surgery to the College.—John Lizars.

Museum of the College. Conservator.—W. MacGillivray.

This Museum is of great extent and value. Students are provided with tickets of admission, on registering their names and classes in the Album of the College, at the commencement of the Session.

To become a *Fellow* of the Royal College of Surgeons, the candidate is required—1. To present an Essay upon some surgical subject, which if approved of, he must print for circulation among the Fellows. He has then to undergo Three Examinations before the College. 1. On Anatomy and Surgery. 2. On Chemistry, Materia Medica, &c. 3. On the Essay he has written. If he passes these examinations to the satisfaction of the College, he is admitted to the Fellowship. The fee for admission is 250*l.*; except to apprentices of Fellows, who pay only 100*l*

REGULATIONS

For Candidates wishing to obtain the *Diploma* of the Royal College of Surgeons.

1838.

I. *Schools of Medicine and Teachers recognised by the College.* These are,—

1. Universities. 2. All Established Schools of Medicine, by which terms are meant all places in this country where Diplomas in Surgery are granted, and all Foreign Schools acknowledged by the authorities of the countries where they exist. 3. Provincial Schools, especially recognised by the College. 4. The Course must further be delivered by Fellows of the Royal Colleges of Physicians or Surgeons of Edinburgh; Professors of Universities, Fellows or Licentiates of the Royal College of Physicians of London, and of the King's and Queen's College of Physicians in Ireland, Fellows of the Royal Colleges of Surgeons of London and Dublin; and of the Faculty of Physicians and Surgeons, Glasgow; or such persons holding a Medical or Surgical Diploma whose courses shall have been specially recognised by the College.

After May, 1839, the College will recognise the Course of no teacher who lectures upon more subjects than *one.* Notwithstanding, the following branches may be conjoined without disqualification.—Anatomy and Practical Anatomy—Chemistry and Practical Chemistry—Practice of Medicine and Clinical Medicine—Practice of Surgery and Clinical Surgery—Mathematics and Mechanical Philosophy.

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* Professors in the University.
† Examinators.

II. *Course of Study required from Candidates.*

1 Every Candidate must either previously to, or during the course of his Medical Education, have received instruction in Mathematics; and must have attended a recognised Course of mechanical Philosophy of at least Three Months' duration. He is also required to possess a competent knowledge of Latin, and must be 21 years of age.

2. The Candidate must have attended the following separate courses of Medical Lectures during a period of not less than 27 months, in which must have been included Three Winter Sessions of Six Months' duration each, viz.:—

Courses of Six Months' duration.—Anatomy, Practical Anatomy, and Surgery, two courses of each. Chemistry, Materia Medica, Physiology, Practice of Medicine, Clinical Medicine, Clinical Surgery; one Course of each.

Courses of Three Months' duration.—Practical Chemistry, Midwifery, Medical Jurisprudence; one Course of each.

3. He must further have attended for Twenty-one months a Hospital, containing at least 80 beds. He must also bring evidence of having been engaged, by Apprenticeship or otherwise, in compounding and dispensing Medicines, for at least Six Months.

Candidates who have begun their Medical Studies previously to the following dates, are entitled to the exemptions here specified, viz:—

Before	Exemptions,
Sep. 28, 1838.	1. More than 4 Winter Sessions' Study.
Ditto	2. More than 18 Months' Hospital Attendance.
Ditto	3. More than 6 Months' Practical Anatomy.
Ditto	4. From necessity of producing certificate of age.
Sep. 1833.	From Practical Pharmacy.
Aug. 1, 1831.	From Medical Jurisprudence.

Examinations take place on the first and third Tuesdays of every Month.

The fee for a Diploma is 7*l.* 5*s.*, except to Apprentices of Fellows; of whom those bound for the freedom pay 25*s.*; and the others, 2*l.* 16*s.* 6*d.*

The number who received Diplomas in the course of the 12 months, commencing October, 1837, is 140; of whom 94 were from Scotland, 20 from England, 18 from Ireland, and 8 from abroad.

Ten Years, 1823-32. Fees received for 1632 Diplomas, 8773*l.*; paid to the Examinators, 1720*l.*—(*Parl. Return.*)

PRIVATE LECTURES IN EDINBURGH.

The following Courses of Lectures, delivered by Fellows of the Colleges of Physicians and Surgeons of Edinburgh, although not recognised by the University, qualify for the Diploma of the Royal College of Surgeons:—

Anatomy.—Knox, Old Surgeons' Hall, 11 a. m., and 3 p. m.; A. J. Lizars, 11, Argyle-square, 11 a. m., and 3 p. m.; Handyside, 4, Surgeons'-square, 11 a. m., and 3 p. m.; Allen Thomson, 9, Surgeons'-square, 11 a. m.

Practical Anatomy.—The above-named Lecturers on Anatomy, from 9 a. m. to 4 p. m.

Chemistry.—Fyfe, 3, Surgeons'-square, 10 a. m. Murray, 11, Argyle-sq., 10 a. m.; D. B. Reid, 6, Roxburgh-place, 10 a. m.

Practical Chemistry.—By the above-named Teachers of Chemistry.

Materia Medica and Pharmacy.—J. A. Robertson and Seller, 11, Argyle-square, 7 p. m.; A. D. Maclagan, 9, Surgeons'-square, 1 p. m.

Physiology.—J. Reid, 11, Argyle-square, 10 a. m.

Practice of Medicine.—Craigie, 4, High School-yards, 9 a. m.; G. A. Borthwick, Infirmary-street, 9 a. m.; T. Wood, 11, Argyle-square, 9 a. m.; Spittal, Old Surgeons' Hall, 9 a. m.; A. Wood, 9, Surgeons'-square, 9, a. m; Henderson, 4, Surgeons'-square, 9 a. m.; Reid, 37, Nicolson-street.

Surgery.—J. Lizars, 11, Argyle-square, 2 p. m.; J. A. Robertson, 4, Surgeons'-square, 2 p. m.; W. Fergusson, Old Surgeons' Hall, 2 p. m.

Clinical Medicine.—T. Shortt. Royal Infirmary, 4 p. m., twice a week; Craigie, Royal Infirmary, 3 p. m., twice a week.

Clinical Surgery.—A. Watson and W. Fergusson, Royal Infirmary, 4 p. m., twice a week.

Midwifery.—Thatcher, Surgeons'-square, 3 p. m.; W. Campbell, Old Surgeons' Hall, 3 p. m.; Marr, 11, Argyle-square, 6 p. m.; Simpson, 9, Surgeons'-square, 6 p. m.

Medical Jurisprudence.—D. Skae, 11, Argyle-square, 10 a. m.

Natural Philosophy.—Lees, Adam-square. 12 o'clock; Russell, Infirmary-street. 12 o'clock.

The private lecturers illustrate their lectures by demonstrations, &c., wherever practicable; and some of them have collections of great value.

These courses are all of six months' duration, excepting Practical Chemistry, Clinical Surgery, Midwifery, and Medical Jurisprudence, which are of three months' duration.

Fee for each of the above courses, 3*l.* 5*s.*; for Chemistry and Practical Chemistry jointly, 5*l.* 7*s.*

ROYAL INFIRMARY.

The Royal Infirmary can accommodate 300 patients, and is divided into three departments. 1. The Surgical Wards. 2. The Ordinary Medical Wards. 3. The Clinical Wards.

Ordinary Physicians.—T. Spens, T. Short, Craigie, and G. A. Borthwick.
Consulting Surgeons. — Sir G. Ballingall, J. Campbell, Sir C. Bell.
Acting Surgeons.—Syme, A. Watson, W. Ferguson.
Assistant Surgeon.—J. A. Robertson.

Statistics.—Edinburgh Infirmary, during the ten years from 1826-35, cases discharged, 31,739; average number in the house, 226·9; died, 2762. Glasgow Infirmary, during the ten years 1822-31, cases discharged, 23,573; average number in the house, 210·0; died, 2173. Edinburgh Infirmary,—deaths in 100 cases, 8·7; days of treatment, 26: mortality in 36·5 days, ·122. Glasgow Infirmary,—deaths in 100 cases, 9·2; days of treatment, 32·5; mortality in 36·5 days, ·104.

The average number in the Infirmary, Edinburgh, is the average number at the end (October) of the ten years; the Glasgow return is from Dr. Buchanan's History of the General Infirmary.

The Professor of Clinical Surgery is always an acting surgeon, and gives lectures throughout the year on the cases. One of the ordinary surgeons also gives a Clinical Course.

The Clinical Medical Wards accommodate 80 patients, and are attended by four of the medical professors of the University in rotation—two attending at the same time. A course of Clinical Medicine is also given by two of the ordinary physicians.

The ordinary medical officers are appointed by the managers of the institution. The surgeons hold their office for a limited period, but may be re-elected. Their services are entirely gratuitous.

Every medical officer visits his patients regularly once a day, from 12 to 1. There are no days fixed for operations, which, when required, are performed at 12 o'clock, in a spacious and handsome operating theatre. Pathological dissection from 1 to 2.

There are six *Clerks* resident in the house, three of whom are attached to the physicians, and three to the surgeons. They are appointed by the managers, the preference being given to those candidates who possess the best certificates of qualifications and character. They hold their office for two years, being first appointed to the medical wards, and attaining the office of *House Surgeon* according to seniority. They pay an annual board of fifty guineas.

Twelve *Surgeons' Dressers* are appointed by the managers every six months. The appointments take place in May and November. They pay a fee of 3*l.* 3*s.* to the house on their appointment.

The Professors of Clinical Medicine have each the power of naming four gentlemen to act as *Clinical Clerks*, subject to the approval of the managers. This situation is much sought after, and is usually conferred by the professors on the most distinguished students. The clinical clerks pay a fee of 3*l.* 3*s.* to the house on their appointment, and hold the situation for three months.

There are no out-patients treated at the Infirmary, all such cases being seen at the Dispensaries. Applicants for admission into the house attend daily from 11 to 12. The recommendation of any householder is all that they require to bring with them. From the Report of the Managers for the year 1837, it appears that 4164 persons had that year received the benefits of the Institution, of whom 272 had remained from the preceding year, and 3892 had been admitted. The number discharged was 3379; died 450, leaving 335 still in the House. The number of patients is stated to have been greater than in any former year of the history of the Infirmary, and to exceed the average number of the last 13 years by no less than 912. This is ascribed to the unusual prevalence of Typhus fever in the city, especially towards the end of the year, and which, by the commencement of 1838, had so increased as to render it necessary to open for some months another hospital for the reception of fever cases. The expenditure during 1837 was £6727.

The following are the fees payable by students for admission to the practice of the hospital:—

Annual Ticket, 5*l.* 7*s.* 6*d.*; Half-yearly, 3*l.* 5*s.* 6*d.*; Perpetual, 12*l.* 7*s.*

LOCK HOSPITAL,

SURGEON-SQUARE.

Medical Officers.—J. A. Robertson, J. G. Simson.

Females affected with venereal complaints are not received into the Royal Infirmary. This hospital was therefore instituted within the last two or three years for the exclusive reception of such cases. Students have an opportunity of seeing the practice on the payment of one guinea, which entitles them to admission for three months.

The visit is made at one o'clock on Tuesdays, Thursdays, and Saturdays; and at two on the alternate days.

LYING-IN HOSPITAL.

Physician.—Hamilton, Professor of Midwifery in the University.

Assistant Physician.—Tiegler.

This Institution is designed for the students attending the midwifery class in the University. Women are delivered in the hospital, and also at their own houses. To the former, students are summoned in classes of five or six; the latter are distributed among such students as are willing to attend them. The average number of cases delivered in the house yearly is about 200; of out-cases, 600.

No pupil can be admitted to this Institution unless he possesses the ticket of the midwifery class in the University. A six months' ticket to the hospital costs 1*l.* 2*s.*; a three months' ticket, 11*s.* 6*d.*

The diseases of women and children are not treated at this Institution.

The private teachers of midwifery have also dispensaries for lying-in women, for the advantage of their pupils. Dr. Thatcher has besides a dispensary for the diseases of women and children.

ROYAL PUBLIC DISPENSARY.

Instituted 1776.

Physicians.—Borthwick, Spittall, Ransford, J. G. Simson, Bell, Spens.

Surgeons.—Fergusson, Professor Lizars, A. Miller, B. Bell, Watson.

Three of the physicians and three of the surgeons attend in rotation every three months. A physician and surgeon attend at the Dispensary daily from 2 to 3 p. m., and vaccinations take place every Wednesday and Saturday, from 1 to 2 p. m.

Two of the medical officers retire annually, when a new election takes place.

Number of patients seen at the Dispensary, from Jan. 1, 1826, to December 31, 1835, 35,778; number seen at their own houses, 31,844. Vaccinations, 3522. Total patients, 71,144.

Every medical officer is allowed to have two pupils, who pay to the funds of the Institution one guinea for each month of attendance.

NEW TOWN DISPENSARY.

Instituted 1815.

Medical Officers.—A. Wood, Farquharson, Omond, A. D. Maclagan, Balfour, Duncan, P. Newbigging, W. H. Thomson, G. Paterson.

Physicians Accoucheurs.—Macaulay, Dumbreck, Pagan.

Two medical officers are in daily attendance, from 1 to 2 p. m. Vaccinations, Tuesdays and Fridays, from 12 to 1.

The number of medical and surgical patients since 1815 is above 160,000. In 1837, 7090 applied for advice, of whom 4472 were visited at their own houses. Number vaccinated, 383. Midwifery cases, 118.

As in the other Dispensary, two pupils are attached to each medical officer. They pay for the first three months 2*l.* 5*s.*; for the second, 1*l.* 1*s.* Besides general cases, they may also, if they please, attend lying-in patients. Pupils are also received into the Laboratory of the Institution.

EYE DISPENSARY.

405, LAWN-MARKET.

Surgeons.—J. A. Robertson, Farquharson, J. Hunter.

Open Mondays, Wednesdays, and Fridays at one o'clock.

The fee payable by pupils is one guinea for three months.

LEITH DISPENSARY, AND EDINBURGH AND LEITH HUMANE SOCIETY.

Humane Society, inst. 1784, Disp. 1816.
United 1825.

Physicians and Surgeons.—C. Anderson, C. Cheyne, J. S. Combe, R. Lewins, T. Craigie, J. Coldstream, G. Kirke, W. Bruce.

Apothecary.—A. Macdougall.

Attend Mondays, Wednesdays, and Fridays, at 1 p. m.; each two months in rotation.

Number of patients, about 2300 annually.

ROYAL SOCIETY, EDINBURGH.

President.—Sir T. Brisbane.

Vice-Presidents.—Lord Glenlee, Dr. Hope, Sir D. Brewster, Lord Greenock, Rev. Dr. Chalmers, Dr. Abercrombie.

General Secretary.—Sir J. Robison.

Secretaries of Meetings.—Dr. Christison, and Professor Forbes.

Treasurer.—Charles Forbes, Esq.

Curator.—Dr. Traill. *Assistant Curator.*—J. Stark.

Council.—Archdeacon Williams; Professor Henderson; G. Forbes, Esq.; Sir H. Jardine; Rev. Dr. Welsh; Sir C. Bell; D. Milne, Esq.; J. Smith, Esq.; Sir J. M. Riddell; Professor Dunbar; Dr. Greville; T. J. Torrie, Esq.

The Society meets from November to May, on the first and third Mondays of every month, at 8 p. m.

The Keith medal, with a handsome piece of plate, is awarded every two years to the author of the most important paper on the Society's Transactions. The last successful competitor was J. S. Russell, Esq., Edinburgh.

WERNERIAN NATURAL HISTORY SOCIETY.—*Instituted in* 1808, for the cultivation and encouragement of natural history. Meets in apartments in the University once a fortnight during the nine months of the College session. Publishes Transactions.

President.—Professor Jameson.
Vice-Presidents.—Dr. J. Coldstream, D. Falconer, Dr. Anderson, W. Copland.
Secretary.—Dr. Neill.
Council.—Dr. Greville, J. Sligo, Dr. Adam, Dr. Macdonald, Dr. Martin Barry, R. J. Hay Cunningham, W. A. Cadell, Dr. R. Hamilton.

MEDICAL SOCIETIES.

MEDICO-CHIRURGICAL SOCIETY.—Composed chiefly of the physicians and surgeons of the city, with corresponding members in the country and abroad, meets once a fortnight for the reading of original papers, which were at first published in express volumes, but now appear in the Edinburgh Medical and Surgical Journal.

President.—Dr. Christison.
Vice-Presidents.—W. Wood, Esq., Dr. Alison, and Sir G. Ballingall.
Council.—Dr. Renton, A. Cockburn, Esq., Dr. Maclagan, Dr. Pagan, Dr. Peeble, Dr. Borthwick, J. Marfarlane, Esq.
Secretaries.—W. Brown, Esq. and Dr. W. Thomson.

ROYAL MEDICAL SOCIETY.—*Instituted* 1737, and consisting of the senior students and young practitioners; meets once a week for discussing papers on assigned subjects, and for hearing medical news. Possesses a very valuable library of medicine and the collateral sciences of about 11,000 volumes.

Presidents, 1837-38.—W. Madden, D. Skae, R. S. Hopper, G. Newbigging. A. Wood and J. Percy elected on the resignation of Drs. Madden and Newbigging.
Secretary and Librarian.—Nicolson Bain.

This society, which has now existed 100 years, has been always considered a very important addition to the various means of medical education in Edinburgh. It is invariably composed of the best class of students. The fees payable by members are, first year of attendance, 4*l.* 10s.; second, 3*l.* 5s.; third, 2*l.* 4s. During the third year of his attendance, each member is required to read an essay, on which, and the payment of his third yearly subscription, he is exempted from all further contributions, continuing, so long as he resides in Edinburgh, to enjoy the free use of the library, and all the other advantages of the society.

ROYAL PHYSICAL SOCIETY.

Composed nearly as the Royal Medical Society, and for nearly the same purposes. Meets in the University once a week during the winter session.

Presidents.—J. T. Simpson, T. R. Cormack, R. S. Hopper, E. Forbes.
Secretary.—J. Gall, jun.

HUNTERIAN MEDICAL SOCIETY.

Also constituted in much the same manner with the Royal Medical Society, and for similar objects. Has a library of above 1000 volumes; and during the session meets once a week in the University.

Presidents, 1837-38.—A. S. Thomson, R. Little, C. H. Grant, R. Mackintosh.
Secretaries.—G. Fearon, and R. W. Falconer.

The entrance fee is 1*l.* 1*s.*, and 10*s.* annually for two succeeding years.

ANATOMICAL SOCIETY.—*Instituted in* 1834, for the investigation of animal and vegetable anatomy, physiology, and pathology. Composed chiefly of young resident practitioners.

President.—Dr. W. Thomson. *Vice President.*—Dr. J. Reid. *Treasurer.*—Dr. Spittall. *Secretaries.*—Dr. Omond, and Dr. Ransford.

Glasgow.

UNIVERSITY.—*Founded* 1450.

The Duke of Montrose, Chancellor.
Rector.

The winter session lasts from Nov. 1, to the 1st of May, when the business of the session closes by a public distribution of prizes.

The summer session begins in May,—and ends in July.

The Medical Lectures commence in the beginning of November.

Degrees in Medicine are conferred on the last Wed. of April, and the first Wed. of August.

Subjects and Lectures.

Anatomy and Practical Anatomy.—Jaffray. *Anatomical Demonstrations.*—Marshall. *Botany.*—Hooker. *Chemistry and Practical Chemistry.*—Thomson. *Diseases of the Eye.*—Mackenzie. *Materia Medica.*—Couper. *Practice of Medicine.*—Bedham. *Theory of Medicine.* — Rainy. *Midwifery.* — Cumin. *Surgery.*—Burns.

Dr. Mackenzie's Course lasts only during Nov., Dec., Jan. Fee 2g. Fee for the other classes, each 3g.

FACULTY OF PHYSICIANS AND SURGEONS OF GLASGOW.

This is the Licensing body for Lanarkshire, Renfrewshire, Dumbartonshire, and Ayrshire. Founded 1599.

Examinations throughout the whole year. Fee for Diploma, 7g.

President.—Panton. *Visitor.*—Perry. *Collector.*—Watson. *Boxmasters.*—Johnson, Maxwell. *Seal Keeper.*—Anderson. *Assistant Examinators.* — Gibb, M'Farlane, M'Dowall, Gray, Drummond. *Manager of Widows' Fund.*—Corkindale. *Librarian.*—Pagan. *Clerk.*—Hill. *Officer and Sub-Librarian.*—Jones.

ANDERSONIAN UNIVERSITY.

Anatomy and Practical Anatomy.—Hunter. *Practice and Theory of Medicine.*—Hanny. *Materia Medica.*—Buchanan. *Surgery.*—Lawrie. *Midwifery.*—Brown. *Medical Jurisprudence.*—Watt. *Chemistry.*—Gregory. *Natural Philosophy.*—Wilson.

Fee for admission to each course, 2g.

ALBION-STREET.

Anatomy and Surgery.—J. Douglas.

ROYAL INFIRMARY.

Physicians.—Cowan, Brown, Anderson. *Surgeons.*—Pagan, Auchincloss, Lawrie, Spittal. *Lecturers on Clinical Medicine.*—Cowan, Brown. *Clinical Surgery.*—Pagan, Auchincloss. *Surgeons' Clerks.*—Hannay, Cleland. *Physicians' Clerks.*—Angus, Stewart, Anderson, Currie, Stewart. *Apothecary.*—Fisher.

The Infirmary and Fever Hospital can accommodate 420 patients. The surgeons' and physicians' clerks pay 40*l.* per annum for board. Students are allowed to attend the hospital practice for two years, on payment to the funds of the Institution of 7*l.* 7*s.*, and are entitled to attend a course of Medical and Surgical Clinical Lectures (four weekly) for six months, without any further payment. Every patient that dies is inspected in the presence of the pupils and medical attendants.

ROYAL ASYLUM FOR LUNATICS.

Physician. — Balmanno. *Surgeon.* — Cumin.

LOCK HOSPITAL.

Physicians.—W. Cumin, and A. J. Hannay.

EYE INFIRMARY.

Surgeons.—W. Mackenzie, H. Rainy. *Assistant Surgeon.*—Wood. Beds, 10.

1837.—Remaining on list, Dec. 1836, 483. Admitted since, 676. Dismissed cured, 541; by operation, 25. Incurable, 6. Dead, 11. Remaining on list, 31st Dec. 1837, 397. Expenditure, 562*l.*

Lectures on the Eye are given every Session, in the University, by Dr. Mackenzie; fee 2*l* 2*s.* Students who attend, or have attended these Lectures, are admitted to the Eye Infirmary, for a fee of 1*l.* 1*s.*, for six months. Other Students pay 2*l.* 2*s.* The number of patients daily in attendance is about 40, about 670 new cases being admitted every month. There is accommodation for 10 in-patients. Regular journals are kept, and are accessible to the Students. Clinical Lectures are given occasionally. The shop for dispensing the medicines is attended by paying a fee of 6*l.* 6*s.* for one year.

LYING-IN HOSPITAL AND DISPENSARY.

Hospital Superintendents.—J. Wilson, J. Brown.

Consulting Accoucheurs.—Maxwell, J. Gibson.

Assistant Accoucheurs, or Out-door Superintendents.—A. Stewart, J. Panton, Hill, Fleming.

Town's Hospital Surgeon.—Auchincloss; with 12 district surgeons, who attend the poor at their own homes.

UNIVERSITY LYING-IN HOSPITAL, AND DISPENSARY FOR THE DISEASES OF WOMEN AND CHILDREN.

Physician.—Cumin.

Patients delivered, 84; out-patients, 160.

MEDICAL SOCIETY.

President.—Dr. Buchanan. *Vice-Presidents.*—Dr. Weir, Dr. Perry. *Treasurer.*—Dr. Cowan. *Secretary.*—Lawrie.

ROYAL BOTANIC INSTITUTION.

President.—The Right Hon. Lord Douglas. *Vice-President.*—The Very Rev. Principal Mr. M'Farlane. *Treasurer.*—James Christie, Esq. *Secretary.*—Laurence Hill, Esq. *Curator.*—Mr. Stewart Murray.

COW POCK INSTITUTION.—1818.

President.—T. Marshall. *Secretary.*—A. Donaldson. *Treasurer.*—T. Inglis.

FACULTY OF MEDICINE.

President.—W. Buchanan, Esq. *Secretary.*—Mr. W. E. C. Clarke. *Treasurer.*—Mr. J. Adam. *Librarian.*—Mr. Wm. Aitkin.

Aberdeen.

UNIVERSITY,—KING'S COLLEGE.—1494.

Professor of Medicine—J. Bannerman.

MARISCHAL COLLEGE.—1559.

Medicine.—C. Skene, and J. Macrobin. *Chemistry.*—T. Clark.

Medical School.—The winter session lasts from the beginning of November to the middle of April; the summer session from the beginning of May to the end of July.

Subjects and Lecturers.—*Anatomy, Physiology, and PracticalAnatomy.*—Pirrie. *Botany.*—Knight. *Chemistry.*—Clark. *Materia Medica.*—Henderson. *Midwifery.*—Fraser. *Practice of Physic.*—Macrobin. *Surgery.*—Laing. *Theory of Medicine.*—Geddes.

MEDICO-CHIRURGICAL SOCIETY.—1789.

President.—Dr. Jameson. *Secretary.*—D. Kerr, Esq. *Librarian and Curator of the Museum.*—A. Moir, Esq.

Meetings are held on the first Thursday of every month, at 7 P. M.

There is also a junior class of this Society, attended by students, which meets every Tuesday, (and every alternate Saturday during the summer,) at 6 P. M.

Private Lecturers in Aberdeen.—*Anatomy.*—A Moir. *Botany.*—G. Dickie. *Anatomical Demonstrations,* (See Anatomy.) *Materia Medica.*—Kilgour. *Midwifery.*—Robertson. *Surgery.*—G. Morgan.

THE ROYAL INFIRMARY, founded 1739, can accommodate upwards of 180 patients, who are under the care of Drs. Williamson, Laing, Murray, and Dill.

House Surgeon.—A. Cromar. In 1834, in-patients admitted, 1282; out-patients, 1076; annual expenditure, 1900*l.* Once a year Dr. Laing gives a three months' course of Clinical Medicine.

In 1833, the average number resident was nearly 120; the total treated, 1440, deaths, 87. Fifty-seven deaths occurred, in 652 cases of fever; one death in 21 capital operations.

LUNATIC HOSPITAL.—1800.

Physician.—J. Macrobin. *Surgeon.*—J. Will.

1st May, 1836, to 1st May, 1837.

Number of patients, May 1, 1836, 107. *Admitted since,* 39. Whereof were considered curable of the former number, 15; of the latter, 26; making a total of 41. From May 1,1837, to May 1, 1838. In the house, May 1, 1837, 106. *Admitted since,* 43. Whereof considered curable of the former, there were 11; of the latter, 18; making a total of 29.

Expenses, 1 Year, 2197*l.*; received from patients, 2380*l.* 18*s.*

St. Andrew's.

UNIVERSITY.

Founded 1412.

Medicine.—R. Briggs.

Dr. R. Briggs commences his course of lectures on the first Th. in Nov., and terminates on the last Fr. in April.

Conjunct Examinators with the Professor of Medicine.—J. A. Robertson, M. D., A. Lizars, Esq., J. Mackintosh, M. D., W. Gregory, M. D.

Any three, with the Professor of Medicine, form a quorum.

GRADUATIONS AND SURGICAL EXAMINATIONS AT EDINBURGH.

On the 1st of August, 1838, the Senatus Academicus of the University o Edinburgh conferred the degree of Doctor of Medicine on the following gentlemen, in number ninety-eight, after having gone through the appointe examinations, and defended publicly their inaugural Dissertations :

Those marked thus * received the particular approbation of the Medical faculty for the Theses.

Of Scotland.

J. Anderson, on Albuminous Urine
*J. B. Allan, on the most Predominant Diseases of the African Islands
Charles B. Alexander, Angina Pectoris
W. Bowie, Remittent Fever
W. P. Banks, Physiology of the Mental Faculties
D. Curdie, Aneurism of Aorta
J. Drysdale, Inflammation
G. D. Dods, Rheumatism
A. Douglas, Pathology and Treatment of Dropsy
E. Gibbons, Urinary Calculi
A. Graham, Aneurism
T. Graham, Gunshot Wounds
*T. Hamilton, Respiration and Animal Heat
A. H. Howe, Inguinal Hernia
W. Hutcheson, Imbecility of Mind
C. M. Henderson, Croup
A. Jackson, Effects of Heat on the Body
J. Kilgour, Digestion
J. Logan, Nervous System
J. S. Mackintosh, Scarlet Fever
A. Manson, Abscess
*J. Macauley, Effects of Vegetation on the Atmosphere
G. Morison, Atomic Theory
A. Mitchell, Hospital Gangrene
J. Macleod, Hospital Gangrene
A. R. Macdonald, Egyptian Ophthalmia
D. Mackenzie, Ulcers and Hospital Gangrene
G. M. Porteus, Delirium Tremens
J. Peter, Arsenic and its Preparations
G. R. Playfair, Continued Fever
T. Renwick, Tropical Dysentery
J. Ruxton, Peritonitis
*J. R. Russell, Respiratory System of Nerves
H. Roy, Dysentery
A. J. Scott, Laryngismus Stridulus
E. Skae, Tic Doloureux
J. P. Smith, Observations on the Blood in Health and Disease
D. Sinclair. Hydrocele
D. Thomson, Inguinal Hernia
A. Wilson, Purulent Ophthalmia
G. M. Webster, Fractures

From England.

M. F. L. Andrews, Sedative Effects of Alum
*G. Atkin, on Superposition, and the Value to be assigned to Zoological and Botanical characters in determining the Age of Rocks
*E. Adolphus, Pathology of the Urine
*W. Budd, Acute Rheumatism
A. C. F. Colclough, Hæmoptysis
*J. Chadwick, Nature and Cause of Respiratory Motions, and the Medico-legal Questions arising from the subject
G. Cookson, Typhus Fever
H. A. Dawe, Digestion
F. C. Goodwin, Menstruation
J. D. Henwood, Puerperal Fever
J. M. Hopkins, Chlorosis
*W. Jepson, Typhus Fever as prevailing in Edinburgh
F. C. Jones, Typhus Fever
*H. Lonsdale, Experimenta inquiry into the Physiolog cal Action, &c., of Hydrocyanic Acid
W. Lloyd, Nutrition of Plant
W. F. Laurie, Pericarditis
*C. Maitland, Continued Feve
H. Mapleton, Burns and thei Consequences
*J. Percy, Presence of Alcohol in the Ventricles of the Brain after poisoning, b that Liquid
*J. Ryan, Philosophy of Medicine
*G. P. Smith, Comparative View of Lithotomy and Lithotrity
A. J. Skrimshire, on Chronic Remittent and Intermitten Fevers
W. Taylor, Relative Effects o Animal and Vegetable Die on the Physical and Mora Condition of Mankind
H. Umpleby, Vaccination
A. Wilmott, Intermitten Fever
*F. J. White, Geographica Distribution of Plants
*M. A. E. Wilkinson, Pneumonia

From Ireland.

R. E. Bateman, on a New Auscultatory Sign observable in the Incipient Stage of Phthisis
J. D. Blake, on Croup
A. Borland, Scarlatina
M. Broderick, on the Examination of Patients
A. Cheyne, Causes of Disease among Soldiers
R. Chambers, Rheumatism

. W. M. Crooke, on Treatment of Secondary Symptoms
. H. Dowling, Empyema
. T. Haslett, Hydrophobia
J. Johnson, Influence of Mind as a Therapeutic Agent
. Kellet, Amenorrhea
. J. Layton, Phthisis Pulmonalis
. Macminn, Gastritis
. O'Hara, Indigestion
R. Riggs, Dropsy
A. Stanton, Empyema
J. Stewart, Ergot of Rye
H. Shiel, Delirium Tremens
*E. Vaughan, Ephemeral Fever

From Abroad.

*T. J. Coghlan, on Dysentery
*A. Fisher, on Asphyxia
C. Galland, on Dilatation of the Air-cells
J. F. Inverarity, on Rubeola
W. J. Irvine, Origin of Carbonic Acid produced during Respiration
H. G. Luttrell, Inflammation
*M. M. De Bartolome, Pericarditis
A. Maclaverty, Comparative View of Lithotomy and Lithotrity
A. C. Macrae, Mineral Waters
A. R. Morton, Dysentery
*J. N. Pinkerton, on Sleep

SURGEONS' HALL, EDINBURGH.

Gentlemen to whom the Royal College of Surgeons has granted Diplomas, Sept. 1837-38.

Scotland.

ames Summers
eorge Wilson
. W. Miller
ohn Rattray
H. Blackwell
ndrew Paton
ames Edwards
. G. M'Gillivray
oseph Laurie
hos. Davidson
ndrew Graham
ohn Niven
ord Littlejohn
hos. A. Douglas
ohn Anderson
. B. Alexander
has. B. Gill
hos. W. Dawson
avid Russell
eo. Williamson
eil Mackenzie
ohn Davidson
olin M'Coll
ho. G. Traquair
ohn Taylor
lex. M'Donald
ohn Aitken
Robert Anderson
James Burton
Gilb. T. M. Martin
John Dickson
George Dickson
F. T. Richardson
James Smith
James Laird
James Cross
Alexander Grant
William Craig
Rich. Johnstone
Robt. Pairman
Thomas Murray
Andrew Lillie
Thomas Malcolm
Eben. Robertson
Alex. Mitchell
John Paterson
Geo. Merrison
Alex. Wilson
Robert C. Fluker
Bright Hannah
John Ruxton
George D. Dods
David E. Wilkie
Alex. H. Howe
Arch. Arnott
Lewis Urquhart
William Bowie
Wm. Symington
Thos. Graham
David Lyall
Hugh Beveridge
Alex. Clellard
John J. Drysdale
Alex. Manson
Alex. Stevenson
Alex. Stewart
W. R. Cockburn
George Rosa
Hugh Donaldson
W. S. Carmichael
Charles Forbes
Duncan M'Rae
William Leitch
James Welch
Duncan M'Laren
Daniel Curdie
Thos. Renwick
Alex. L. Spence
James Fisher
James P. Smith
Jas. B. M'Gregor
James Turnbull
Robert Steel
John Millar
Wm. A. Bryden
Chas. D. Stewart
Alexander Wood
Walter B. Balfour
James Kilgour
Wm. W. G. Watt
James M'Gregor
Wm. J. Scott
Geo. W. Thomson
Francis W. Kerr

England.

Henry Franklin
Chas. J. Hanson
John P. Phillips
Jas. Williamson
William M'Gill
Fr. A. M'Dougall
Rich. M. Pigot
Wm. F. Laurie
H. H. Mackenzie
Wm. J. Browne
Rich. B. Hatfield
Fred. C. Jones
Hen. R. Madden
John Ryan
Henry Umpleby
Ben. H. Yate
Wm. Jepson
Wm. Strange
Hartl. S. Laycock
Thomas Bradley

Ireland.

Alex. Macshane
James Lindsey
Jas. S. Thomson
Eug. C. M'Carthy
T. C. Molesworth
Rich. Chambers
Eccles Gawley
John Smyth
Ed. Montgomery
Sam. T. Haslitt
John Johnston
Fred. M'Minn
John White
Thos. J. Layton
James M. Barry
Wm. Tatlock
Ric. E. Bateman
George Bolster

From Abroad.

Henry A. Dawe
Adams Jewett
Hen. Colebrooke
George Saydon
Chas. S. Sellar
Julius Veronge
Edw. H. Jackson
Jas. N. Pinkerton

IRELAND.

Dublin.

UNIVERSITY OF DUBLIN.

Regulations for obtaining the Degrees of Doctor and Bachelor of Medicine, from the University of Dublin.

BACHELOR'S DEGREE.

The candidate is required to present Certificates of having attended one course of lectures on the following subjects, viz.:—Anatomy and Surgery, Chemistry, Botany, Institutes of Medicine, Materia Medica, Midwifery, and two courses of Clinical Lectures; these certificates must be taken from the Professors of Trinity College, the King's Professors, appointed under the Irish School of Physic Act, and the Professor of Midwifery appointed by the College of Physicians, unless some three certificates for the same courses in the University of Edinburgh be produced, which are received by the Board.

At *any commencement* after graduating in arts, the candidate may present himself for examination for the Medical degree; this is conducted in the English language by the Regius Professor of Physic, the Professors of Anatomy, Chemistry, and Botany. If found qualified, after performing certain exercises, the Degree is conferred on the candidate by the Vice Chancellor of the University.

DOCTOR'S DEGREE.

Five years occupied in the study of Medicine must elapse, before the Bachelor of Medicine can obtain the Doctor's degree; he is then to submit to a second examination, write and publish a Latin thesis on some Medical subject, and perform the exercises directed in the statutes for the degree of M.D.

The degrees of Bachelor and Doctor of Medicine from Trinity College, rank with the degrees of M.B. and M.D. of Oxford and Cambridge. Deposit for M.B., 11*l.* 15*s.*; for M.D., 22*l.*

Students in Physic are matriculated in the University, for which they pay 5*s.*; but they are not obliged to attend the academical duties of the University.

No degree in Medicine is given without previous study in Arts, which occupies four years.

KING AND QUEEN'S COLLEGE OF PHYSICIANS IN IRELAND.

Candidates admissible to examination for the Licence of the College, consist of two classes:—

I. Graduates in Medicine of one of the Universities of Oxford, Cambridge, Dublin, Edinburgh, or Glasgow.

II. Candidates having completed, *without graduation*, the course of Medical study required by the College.

1st Class. Candidates who have graduated in Medicine in one of the above Universities since the 1st of Jan. 1829, are required to produce proof of

1. Attendance on a Course of Lectures on Surgery.
2. Ditto on Midwifery.
3. Ditto of Dissections.
4. Ditto on a Medico-chirurgical Hospital during one year, in addition to the Hospital practice required for Medical graduation.

2nd Class. Candidates without graduation are required to produce proof of

1. Attendance on Courses of Lectures: on *Anatomy*, *Chemistry*, *Botany*, *Materia Medica*, *Institutes of Medicine*, and *Practice of Medicine:* one course, at least, to have been attended in each of the four years.
2. Ditto on three Courses of *Clinical Lectures*, not more than two of which to be attended in any one year.
3. Ditto on a Course of Lectures on *Surgery.*
4. Ditto on a Course of Lectures on *Midwifery.*
5. Ditto on a Course of *Dissections.*
6. Ditto on Hospital practice during two years; one at the Hospital of the School of Physic in Dublin or Edinburgh, and one at a Medico-chirurgical Hospital recognised by the College.

The lectures, except those on Surgery and Midwifery, must be delivered by Professors in the School of Physic of Dublin or Edinburgh.

The lectures on Surgery, and on Midwifery, are required to be delivered on at least three days in the week, by a professor in any College of Physicians or Surgeons, by a Surgeon of a Medico-chirurgical Hospital, recognised by the College, or by the Master of the Dublin Lying-in Hospital.

Attendance on Dissections must include Demonstrations, and the actual dissection of at least one subject, by the candidate.

The courses of Clinical Lectures are required to be taken at the School of Physic Hospitals of Dublin or Edinburgh; or, two courses at said Hospitals, and one at a recognised Medico-chirurgical Hospital.

Medico-chirurgical Hospital practice must include the practice of one or more of the following Dublin Hospitals: viz., Stevens's, Richmond, Mercer's, and the Charitable Infirmary, Jervis-street; or of such Hospitals of Great Britain or Ireland as the College may judge to afford equal opportunities for instruction.

The candidate is examined on two days; on the first day, Anatomy and Physiology, Chemistry, Botany, and Materia Medica; and on the second day, Pharmacy, Acute and Chronic Diseases, the non-naturals, and the translating of one or more of the following books from the Greek; viz., Hippocrates, Galen, and Aretæus.

All candidates, except Graduates in Arts, of Oxford, Cambridge, or Dublin, are required to translate Medical cases from the English into the Latin language.

The following resolution has been just agreed to by the College:—

"That such existing Graduates in Medicine of the Universities of Dublin, Oxford, and Cambridge, being also Graduates in Arts, as shall be examined for a Licence to practice Physic within two years from the present date; and such persons hereafter graduating as aforesaid, who shall be examined within two years from such graduation, shall pay a fee of 30*l.*, and shall undergo only the practical examination usually held on the second day."

ROYAL COLLEGE OF SURGEONS IN IRELAND.

Laws relating to the Examination for Letters Testimonial.

Every registered pupil, or apprentice, shall be admitted to examination, on laying before the Court the following documents:—

1. A receipt, showing that he has lodged twenty guineas in the Bank of Ireland, for the use of the College.

2. A Certificate from the Court of Censors that he has passed an examination in the Greek and Latin languages.

3. If he be an apprentice, his indenture, with Certificate from the Member or Licentiate, to whom he has been indented, that he has served the full term of five years.

4. If he be not an apprentice, Certificates showing that he has been engaged in the study of his profession in some Hospital, or School of Medicine, or Surgery, for four years; and that he has attended lectures, or hospitals, for three years at least, in Dublin, Glasgow, London, or Edinburgh.

5. A Certificate from the Chairman of the Pharmacy Court, that he has passed the examination in Chemistry, Materia Medica, and Pharmacy.

6. A Certificate from the Chairman of the Midwifery Court, that he has passed the examination in Midwifery.

7. Certificates of attendance on a surgical hospital, containing fifty patients, for a period of two years, and a Medical hospital one year.

8. Certificates of attendance on three courses of lectures on *Anatomy* and *Physiology;* three on the *Theory and Practice* of *Surgery*, and of the performance of three courses of *Dissections*, accompanied with *Demonstrations;* two on *Chemistry*, or one on general and one on *Practical Chemistry;* one on *Materia Medica;* one on *Midwifery;* and one on *Medical Jurisprudence.*

9. A Thesis, Essay or Dissertation in Latin or English on any of the foregoing subjects; or in place of such Dissertation, a series of Cases collected in Hospital, illustrated by comments or observations.

The Candidate shall be examined on two several days, in Anatomy and Physiology; on the Practice of Medicine and Surgery; and on any other branch of Medical science, and shall perform such Surgical Operations or Dissections, and explain such Anatomical preparations, as the Court may require.

Certificates of attendance on lectures delivered in Ireland, will not be received, unless from teachers in Schools, permitting the visitation of the Court of Censors, and receiving their sanction. Neither shall Certificates be taken from any teacher, in any Institution or College in Great Britain or Ireland, which refuses to receive the certificates issued by the Professors of this College; nor shall certificates be received from teachers who lecture upon more than one distinct subject.

Lectures on *Anatomy* and *Physiology* must be given on five days in the week of the usual Winter season. On *Surgery*, on three days in the week; the Lectures on *Medicine*, Chemistry, Materia Medica, Midwifery, and Medical Jurisprudence, shall be at least sixty in number; and the courses of Dissections and Demonstrations shall be of six months' duration.

APOTHECARIES' HALL, DUBLIN.

Regulations for the Examination of Apprentices and Licentiates.

Candidates are required to undergo *two* examinations; one preparatory for the Certificate of Apprentices, the other at the completion of the Apprenticeship, for the Licence to practise.

No Candidate for Apprenticeship examination will be admitted under the age of fifteen years; the candidate will be examined as to his proficiency in the following books in Latin, viz.: Cæsar, Sallust, Virgil, Horace; and in Greek, the New Testament, Lucian, Homer.

Every Candidate for License to practise, must produce the following documents:—

1. Certificate of Apprentice obtained from the Court.

2. An Indenture of Apprenticeship with a Certificate signed by the Licentiate, to whom he has been indented, of his having completed the time required by the Act.

3. Certificates of his having attended at least one course of Lectures on each of the following subjects, delivered in the School of Medicine of the Apothecaries' Hall, or in some other School recognised by the Court, viz.:—

Chemistry, Anatomy; six months.

Practical Chemistry, Botany, Materia Medica; three months.

Dissections and Demonstrations, Practice of Medicine, Surgery, Midwifery; six months.

Forensic Medicine; three months.

4. Certificate of his having attended for six months during the last year, the entire practice of a Medico-chirurgical Hospital, containing at least fifty beds, and where Clinical instruction is regularly given.

The Examination will be as follows:—

1. In translating and explaining the processes of the Pharmacopœia, and extemporaneous prescriptions.
2. In Chemistry and general Physics.
3. In Materia Medica and practical Pharmacy.
4. In Natural History and Medical Botany.
5. In Anatomy and Physiology.
6. In practice of Medicine, Midwifery, and Toxicology.

No rejected Candidate can be re-admitted for examination until the expiration of six months from his forme one.

Licentiates are privileged to attend all the examinations.

Fees: For the Certificate to become an Apprentice, five shillings.

For License to practise as an Apothecary, ten shillings.

SCHOOL OF PHYSIC IN IRELAND.

The Professors commence their Lectures and Hospital attendance on the first Monday in November, and end in April.

Materia Medica.—Dr. Crampton, at eleven o'clock. *Sir P. Dun's Hospital,* visited by the Clinical Lecturer, at twelve o'clock. *Anatomy and Surgery.*—Dr. Harrison, at one o'clock. *Chemistry.*—Dr. Barker, at two o'clock. *Practice of Medicine.*—Dr. Lendrick, at three o'clock. *Institutes of Medicine.*—Dr. Graves, at four o'clock.

Dr. Allman's Lectures on *Botany* will commence the last week in April, and end before the middle of July. *Midwifery,* Dr. Montgomery, at ten o'clock, a.m.

The Lectures on Anatomy and Surgery, Chemistry, Botany, are delivered in Trinity College. The Lectures on Materia Medica, Practice of Medicine, Institutes of Medicine, Midwifery, and the Clinical Lectures, in Sir P. Dun's Hospital.

Clinical Lectures are delivered on two days in the week by Drs. Harrison and Lendrick. Clinical Lecturers in rotation for the ensuing Session.

Anatomical Demonstrations will be given in Trinity College, daily, at twelve o'clock, by Drs. Boswell, Hatchell, and Williams.

Operating pupils are instructed in General and Pharmaceutic Chemistry at the laboratory of Trinity College, by Dr. W. Barker.

The extensive Botanical Garden of Trinity College affords facilities for obtaining a knowledge of that science. Demonstrations are annually given there by the Curator, Mr. Mackay. Fee, One Guinea.

Fees for attendance on each of the above Courses, Four Guineas, with the exception of the Clinical Lectures and Anatomical Demonstrations, which are Three Guineas each Course.

Deposit for Subjects, 1*l.* 10*s.*

The first twelve Lectures of each of the University Professors are open to the public.

Lectures on *Mineralogy* are given in Spring, by the Professor of Natural History in Trinity College, free to all matriculated students.

ROYAL COLLEGE OF SURGEONS IN IRELAND.

The Winter Session commences on the 29th of October, and terminates on the 30th of April.

Anatomy and Physiology.—Dr. Jacob. *Practical and Descriptive Anatomy.*—Hargrave, Hart. *Surgery.*—Wilmot, Porter. *Medicine.*—Benson, Evanson. *Chemistry.*—Dr. Apjohn. *Materia Medica.* — Williams. *Midwifery.* — Dr. Maunsell. *Medical Jurisprudence.*—Dr. Geoghegan.

The *Anatomical Demonstrations and Dissections* are conducted by the Professors of Practical Anatomy, assisted by the Demonstrators, Dillon, Leeson, Labatt, Waters.

Twelve Introductory Lectures on Comparative Anatomy are delivered by the Professor of Anatomy and Physiology.

The Professor of Chemistry gives a separate Course on Practical Chemistry, and admits operating pupils into the laboratory.

Fee: for Anatomy and Physiology, for Demonstrations and Dissections, Three Guineas each; for each of the other Courses, Two Guineas.

THE SCHOOL OF MEDICINE OF APOTHECARIES' HALL, Cecilia-street, off Dame-street, contains spacious theatres, laboratory, and museums, in which Lectures are delivered in conformity with the regulations of the different Colleges, &c.

Anatomy and Physiology. — Dr. Alcock. *Surgery.*—Mr. Ellis. *Medicine.*—Dr. Ferguson. *Chemistry.*—Dr. Kane. *Botany.*—Dr. Litton. *Materia Medica.*—Dr. Hunt. *Medical Jurisprudence.*—Dr. Leet. *Midwifery.*—Dr. William Adams.

The Fee for each Course is Two Guineas, for Dissections and Demonstrations: for Practical Chemistry, Three Guineas.

SCHOOL OF MEDICINE, Park-street. The Winter Session will commence on Tuesday, Oct. 30, and terminate the last week of April.

Anatomy and Physiology.—Messrs. Cusack, Houston, Carlile, daily, one o'clock, p.m. *Surgery.*—Cusack, Houston, Tuesday, Thursday, and Saturday, at three o'clock. *Medicine.* — Dr. Stokes, Monday, Wednesday, and Friday, at three o'clock. *Chemistry.*—Mr. Collies, Tuesday, Thursday, and Saturday, at two o'clock. *Materia Medica.*—Dr. M'Dowall, Monday, Wednesday, and Friday, at two o'clock. *Midwifery.*—Dr. Beatty, Monday, Wednesday, and Friday, at eleven o'clock, a.m. *Medical Botany.*—Dr. Corbet, to commence in Spring. *Medical Jurisprudence.*—Mr. Stokes, Tuesday, Thursday, and Saturday, at eleven o'clock. *Anatomical Demonstrations.*—Messrs. Stokes and Hill, daily, at twelve o'clock.

Fees: Anatomy Demonstrations, Three Guineas each; each of the other Courses, Two Guineas.

Gentlemen attending the Lectures on Midwifery, are admitted to the Lying-in Hospital, Cumberland-street, for Four Guineas.

The business of this School is carried on in a building erected expressly for the purpose: it contains a convenient theatre, a spacious and well-ventilated dissecting room, a chemical laboratory, and an anatomical museum, exceedingly rich in preparations exhibiting healthy and diseased structure, particularly the latter.

THE RICHMOND SCHOOL OF ANATOMY, MEDICINE, AND SURGERY, North Brunswick-street.—The Winter Course of Lectures will commence the last week in October, and continue six months.

Anatomy and Physiology.—Dr. Power. *Surgery.*—Adams, Smith. *Medicine.*—Dr. Greene. *Medical Jurisprudence.*—Mr. Nunn. *Midwifery.*—Dr. Churchill. *Chemistry.*—Dr. William Barker. *Materia Medica.*—Mr. Cullen. *Demonstrations.*—Mr. Mayne.

Mr. Carmichael's Lectures on the Venereal cases in the Richmond Hospital, will be free to the pupils of this school.

The building in which these Courses are given, contains a museum, two theatres, and well ventilated apartments for dissection.

The vicinity of this building to the Richmond Surgical Hospital, and to the extensive Chronic and Fever Hospitals of the House of Industry, containing in all upwards of 300 patients, affords it many and important advantages.

Gentlemen attending Lectures at the school, are allowed to be present at the principal operations performed at the Richmond Hospital, and can obtain the use of books from the library, at a trifling expense.

SCHOOL OF ANATOMY, MEDICINE, AND SURGERY, 27, Peter-street.—The Session commences on the 1st of November, and terminates 30th of April.

Anatomy and Physiology.—Madden, daily at one o'clock. *Surgery.*—Daily, three o'clock. *Medicine.*—Dr. Nolan, Monday, Wednesday, and Friday, at two o'clock. *Materia Medica.*—Dr. Hanlon, Tuesday, Thursday, and Saturday, at eleven o'clock. *Medical Jurisprudence.*—Dr. Baker, Tuesday and Saturday, at four o'clock. *Midwifery.*—Carmichael, Power, Monday, Wednesday, and Friday, at four o'clock. *Demonstrations.* — Madden, Mahony, Magee, daily, at twelve o'clock.

Terms: for each of the above Courses, 2*l.* 2*s.*

For Demonstrations and Dissection, 3*l.* 3*s.*

The Anatomical and Surgical Classes will be examined weekly; and at the end of the Session, medals will be awarded to the best answerers in those departments.

ORIGINAL SCHOOL OF MEDICINE, Peter-street.—The Course of Lectures will commence, November 1st.

Anatomy and Physiology.—Hayden, daily, at one o'clock *Surgery.*—Hayden, Tagert. *Midwifery.*—Swift, Monday, Wednesday, and Friday, at three o'clock. *Materia Medica.*—Bellingham, Monday, Wednesday, and Friday, at two o'clock. *Botany.*—Mitchell, Tuesday, Thursday, and Saturday, at seven o'clock, p.m. *Medicine.*—Gogarty. *Medical Jurisprudence.*—T. Mitchell. *Demonstration.*—Hayden, Forrest, Sawyer, M'Elree.

Fees: Demonstrations, 3*l.* 3*s.*; each of the other Courses, 2*l.* 2*s.*

The several Classes, Medical, Surgical, and Anatomical, will be examined weekly; and at the termination of the Session.

Premiums will be given to the best answerers in each department. The examination of the Candidates will be open to the public.

DUBLIN SCHOOL OF ANATOMY, SURGERY, AND MEDICINE, 15, Digges-street.—The Winter Session will commence on Thursday, 1st of November, at twelve o'clock.

Anatomy and Physiology.—Mr. Bevan, daily at one o'clock. *Surgery.*—Mr. Auchinleck, on the four first days of each week, at three o'clock. *Medicine.*—Dr. Corrigan, the four first days of each week, at four o'clock. *Botany.*—Dr. Aldridge, Tuesday, Thursday, and Saturday, at eleven o'clock. *Medical Jurisprudence.*—Dr. O'Reilly, Monday, Wednesday, and Friday, at two o'clock. *Midwifery.*—Mr. Nixon, and Mr. Curtis, Monday, Wednesday, and Friday, at eleven o'clock. *Anatomical Demonstrations.*—Messrs. Jameson and Stoker, daily, at twelve o'clock.

The Dissecting-rooms are open on the 1st of October. At the termination of the Session, the Lecturers on Anatomy and Surgery will give premiums to the best answerers on those subjects.

MEDICAL SCHOOL, Marlborough-street. The Winter Course commences the last week in October.

Anatomy and Physiology. — Drs. Irvine and Denham, daily at twelve o'clock. *Anatomical Demonstrations.*—Dr. Gibson, daily at one o'clock. *Midwifery.*—Dr. E. Murphy, daily at eleven o'clock. Fees.—Anatomy, Midwifery, each two guineas. Demonstrations, three guineas.

STEVENS' HOSPITAL.

This hospital contains 200 patients, and is provided with distinct wards for the accommodation of patients afflicted with the Venereal disease, and Diseases of the Eye.

Surgeons.—Messrs. Crampton, Peile, A. Colles, Wilmot and Cusack. *Physicians.*—Drs. Crampton and Marsh.

Medical Clinical Lectures are delivered in Winter, by Drs. Crampton and Marsh. *Surgical Clinical Lectures*, by Messrs. A. Colles, Wilmot, and Cusack.

There is a Dispensary, in which externa patients are prescribed for by the residen Surgeon, W. Colles.

It has also a well-selected Library, fo the use of the Students.

Patients visited in the morning at half past seven.

Terms of Attendance.—Yearly, fiftee guineas; half yearly, ten guineas, including Clinical Lecture.

RICHMOND SURGICAL AND WHITWORTH MEDICAL HOSPITALS, North Brunswick-street.

The Richmond Hospital contains 12 beds for Surgical cases, and has distinc wards for Venereal diseases, and the Diseases of the eye. It has attached to i both the Talbot Dispensary and the Trus Establishment for the relief of the rup tured poor of Ireland; and with it is connected the Richmond School of Medicine, where Lectures are delivered on every subject of Medical Science, and which is situated in its immediate vicinity.

The Whitworth Hospital contains 80 beds. Two wards of this, and one of the Fever Hospital are devoted to the purpose of clinical instruction. Four Clinical Lectures are given in the week by the Surgeons of the Richmond Hospital, and by Dr. Greene, one of the Medical Inspectors of the House of Industry.

There is a Museum containing a considerable number of Pathological preparations, casts, and drawings. There is also a well-selected Library for the use of the Students.

Hospital visited at Eight o'clock.

Surgeons.—Messrs. Peile, Carmichael, Hutton, Adams, O'Beirne, Macdonnell.

Terms for Attendance, Clinical Lectures included, for the Winter Six Months, Seven Guineas; for the Summer Six Months, Five Guineas.

MEATH HOSPITAL AND COUNTY OF DUBLIN INFIRMARY.

Instituted to relieve the poor of the County of Dublin in general—has 95 beds for intern patients, and also relieves upwards of 40,000 externs, annually. *Physicians.*—Drs. Graves and Stokes. *Surgeons.*—Messrs. Crampton, C. Roney, Porter, M. Collis, Smyly, and Rynd.

This Hospital is visited by the Physician at half past Eight o'clock; by the Surgeon at half-past Nine o'clock, daily.

Clinical Lectures are regularly delivered by the Physicians and Surgeons. Terms for Attendance, Twelve Months, Twelve Guineas; Six Months, Seven Guineas, including Clinical Lectures.

A Surgical Registry of all cases admitted is kept, and is open to the inspection of each pupil.

SIR PATRICK DUN'S HOSPITAL.

This Hospital is exclusively Medical, and contains 80 patients. It is in connexion with the School of Physic, and is attended in the winter months by two of the Professors, who give Clinical Lectures in addition to the ordinary medical attendants.

Physicians in Ordinary.—Drs. Osborne and Law. *Physician Extraordinary.*—Dr. Ferguson. *Surgeon.*—A. Jacob.

Terms:—Twelve Months.

Students in Arts	3*l.* 3*s.*
Matriculated	10*l.* 10*s.*

This Hospital contains the library of Sir P. Dun. A librarian attends, who lends out books to matriculated students, on their leaving a deposit, and paying a subscription of 10*s.* a-year.

This building also contains the Hall of the College of Physicians in Ireland, where the President, Fellows, and Licentiates, with the visitors whom they may invite, assemble on the 18th of every month, at 8 o'clock P. M. for the purpose of scientific discussion, and for receiving communications on medical subjects.

Dr. Montgomery's collection of preparations, beautifully illustrative of the development of the embryo and fœtus, is kept here.

CITY OF DUBLIN HOSPITAL.—
Upper Baggot-street.

This institution possesses accommodation for fifty patients, and gives relief to a large number of extern, or Dispensary patients.

Diseases of the eye are prescribed for by Dr. Jacob, on every Monday, Wednesday, and Friday, at nine o'clock.

A distinct and full course of lectures on diseases of the eye, will be given by Dr. Jacob, at which pupils of the hospital are privileged to attend, free of any additional charge.

Clinical lectures are delivered on three days in the week.

Hospital visited at eight o'clock, A. M.

Medical Attendants.—Drs. Jacob, Harrison, Apjohn, Benson, Houston, Mac Adam.

Terms.—Six months, 5 Guineas.
Twelve do. 9 Guineas.

JERVIS STREET HOSPITAL.

This hospital is open to pupils, and medical and surgical lectures are given by the physioians and surgeons. It contains sixty beds, and above 800 patients are annually admitted.

Physicians.—Drs. Corrigan and Hunt.

Surgeons. — Messrs. Duggan, Kirby, O'Reilly, Ellis, Lynch, Stapleton, Harrison.

Extern patients prescribed for in the year 1837, 35,290:—Interns admitted, 818.

Terms.—One Year.—Surgical Practice, 7 Guineas.—Winter Six Months, 4 Guineas:—Summer ditto, 3 Guineas.

Medical Practice, One Year, 3 Guineas.

MERCER'S HOSPITAL.—William-street.

This institution contains about fifty beds. About 700 patients are annually admitted, of which more than 200 are suffering from accidents.

Clinical lectures are delivered by the physicians and surgeons, on two days in the week at least.

Pupils are admitted as dressers.

Pupils having attended the Hospital for two years, are eligible to serve the office of President, on being examined and approved of.

Gentlemen having attended three years, are afterwards free to the Hospital.

Physicians.—Drs. Lendrick and Osborne.

Surgeons.—Messrs. Read, Auchinleck, Daniell, Palmer, Tagert.

Terms:—1st Year, 9 Guineas.—2nd ditto, 9 Guineas.—3rd ditto, 7 Guineas. 1st, Six Months, 6 Guineas.—2nd ditto, 6 Guineas.—3rd ditto, 5 Guineas.

For Three Years, 20 Guineas; or Three Sessions, 14 Guineas.

ST. VINCENT'S HOSPITAL, Stephen's Green.

This Institution contains 60 beds, constantly occupied by cases of great urgency, and has attached to it a Dispensary, where great numbers of sick are relieved. Its internal economy is superintended exclusively by the "Sisters of Charity," on the plan of the Hospitals of la Pitié, Enfans Malades, Paris. *Surgeons.*—Crampton and Ferrell. *Physicians*, Marsh and Bellingham. Clinical Lectures, illustrated by drawings, casts, and preparations, are delivered during the Session.

Terms for a year, Seven Guineas; Six Winter Months, Four Guineas; Six Summer months, Three Guineas, including Clinical Lectures.

DUBLIN LYING-IN HOSPITAL,

Established 1756.

This Hospital contains 140 beds, and upwards of 2,000 women are delivered yearly; 15 beds are appropriated to the Diseases of Females. There are Four Courses of Lectures delivered annually by the master, Dr. Evory Kennedy.

The pupils are permitted to attend labours, under the superintendence of the Master and his Assistants, Dr. Dwyer and Mr. Herdman. There is accommodation for six internal pupils.

Terms of Attendance.—External Pupils, Six Months, Ten Guineas; Internal Pupils, Six Months, Twenty Guineas, including Attendance on Lectures, and Hospital Attendance.

The number of women delivered from December, 1836, to December, 1837, was 2211. Boys, 1076; Girls, 1064. 20 had twins. Children still-born, 67; Children died, 12. Women died, 19.

COOMBE LYING-IN HOSPITAL, AND OPHTHALMIC INFIRMARY, Founded in the year 1829.

It contains 50 beds, some of which are devoted to the Diseases of Women, and a ward is exclusively appropriated to Ophthalmic complaints.

Besides the internal accommodation afforded to patients, there is also attached to the Institution an external department, from which the Pupils of the Hospital are sent to attend Poor Women, who, either from choice or peculiar circumstances, are confined in their own dwellings.

There is a regular clinical course given, which embraces the pathology of the uterus and its appendages.

Pupils are free to the Midwifery Lectures given at the School, 15, Peter-street.

There is also a Course on Ophthalmic Surgery given here, free to the Pupils.

Physicians. — Drs. Carmichael and Power.

Terms.—Internal Pupils, Six Months, Twelve Guineas; External Pupils, Six Guineas. Lectures included. Lectures, Two Guineas.

LYING-IN HOSPITAL, 18, South Cumberland-street. J. Costello, M.D., Master.

Dispensary, daily, from ten to twelve o'clock, at which children are vaccinated. Clinical Lectures by Dr. Costello; Pupils free to Dr. Beatty's Lectures at the Park-street School.

Terms.—External Pupils, Six Months, Six Guineas; Internal Pupils, Six Months, Twelve Guineas, Lectures included.

WESTERN LYING-IN HOSPITAL, 31, Arran Quay, Resident-surgeon, Mr. Speedy.

This establishment contains 18 beds, 100 patients are annually delivered. Patients are also attended at their own houses, usually 400 in the year.

Terms.—External Pupils, Six Months, Six Guineas; Internal Pupils, Six Months, Twelve Guineas, including attendance on Dr. Churchill's Lectures at the Richmond Hospital.

DUBLIN MEDICO-CHIRURGICAL SOCIETY, Established 1835, by the Medical Students of Dublin.

The objects of this Society are the improvement and advancement of Students in every branch of Medicine and Surgery, as well as Physiological and Medico-Philosophical research.

Two Prizes; one of the value of Three Pounds, the other of Two Pounds, will be given for the best Essays written on a subject to be proposed by the Committee.

Diplomas are granted to such Members as have made communications entitling them to such distinction. The Society meets each alternate Saturday during the Winter Session, when the chair is taken by one of the Presidents or Vice-Presidents.

Presidents.—Crampton, Croker, Jacob, Greaves, Marsh, Stokes, Harrison, and Porter. *Vice-Presidents.*—Dr. Crampton, Benson, Montgomery, Adams, Houston, Apjohn, Hart and Corrigan. *Secretary.*—J. H. Clarke.

Belfast.

ROYAL BELFAST INSTITUTION—MEDICAL SCHOOL.

Session commences November 1.

Anatomy and Physiology.—Dr. Drummond, daily, at two o'clock. *Chemistry.*—Dr. Andrews, on four days in the week, at four o'clock. *Midwifery.*—Dr. Little, four days, at three o'clock. *Surgery.*—Dr. Coffey, on four days, at five o'clock. *Materia Medica.*—Dr. Marshall, on four days, at ten o'clock. *Practice of Physic.*—Dr. M‘Cormac, on four days, at seven o'clock, P.M. *Botany.*—Dr. Mater, on five days, at seven o'clock, A.M. *Practical Chemistry.*—Dr. Andrews.—*Anatomical Demonstrations.*—Dr. Drummond.

Fees: for Anatomy and Physiology	3*l.* 3*s.*
Demonstrations	4*l.* 4*s.*
Each of the other Courses	2*l.* 2*s.*

The Lectures on Botany and Practical Chemistry are delivered during the summer months.

Students have an opportunity of attending the Lying-in Charity, under the care of Dr. Little. Fee, for Six Months, Two Guineas.

THE BELFAST MEDICAL AND SURGICAL HOSPITAL contains 120 beds. Clinical Lectures, both Medical and Surgical, are delivered on four days of the week. *Physicians.*—Drs. Thompson and Andrews. *Surgeons.*—Messrs. Moore and Wales, and Dr. Sanders.

Fee, for Twelve Months, including Clinical Lectures, Four Guineas.

Practical Pharmacy is taught at the Dispensary by Mr. Lamont. Certificates of attendance on those Lectures are taken by the University of St. Andrew's; the Colleges of Surgeons of London, Dublin, and Edinburgh; the Faculty of Physicians and Surgeons of Glasgow; and at the Apothecaries' Hall, in Ireland.

Cork.

SCHOOL OF PHYSIC AND SURGERY.

The Lectures commence on the first Monday in November, in each year.

Surgical Anatomy and Surgery. — Dr. Woodroffe. *Practice of Physic.*—Dr. Townsend. *Midwifery.* — Dr. Bull. *Anatomy and Physiology.*—Dr. Harvey. *Materia Medica and Chemistry.*—Dr. Cantillon.

Clinical Surgery at South Infirmary, by Drs. Woodroffe and Bull.

Clinical Medicine at House of Industry, Dr. Townsend.

RECOGNISED SCHOOL OF MEDICINE.

The Lectures at this School commence annually in October.

Anatomy and Physiology.—Dr. Cæsare. *Midwifery.* — Dr. Curtin. *Practical Anatomy.*—Dr. Cæsar. *Practical Surgery.*—Dr. Hobart.

SOUTH CHARITABLE INFIRMARY.

A Physician and Surgeon attend daily at half-past eleven o'clock, to prescribe for externs. Accidents admitted at all hours.

During the Winter Session, Drs. Woodroffe and Bull give Clinical Lectures.

Physicians. — Herrick, Harvey. *Surgeons.*—Woodroffe, Bull. *Apothecary.*—M‘Ever.

NORTH CHARITABLE INFIRMARY.

A Surgeon and Physician attend daily at eleven o'clock, and prescribe for extern patients.

In the year ending Jan. 5, 1837, there were cured or relieved, interns, 419; externs, 14,847. *Physicians.*—Casey, Warren. *Surgeons.*—Howe, Bullen. *Apothecary.*—Hovenden.

SOUTH CHARITABLE INFIRMARY.

Physicians. — Herrick, Harvey. *Surgeons.*—Woodroffe, Bull. *Resident Apothecary.*—M‘Evers.

NORTH CHARITABLE INFIRMARY.

Physician.—Casey, Warren. *Surgeons.* Howe, D. Bullen. *Resident Apothecary.*—P. Hovenden.

FEVER HOSPITAL. *Physicians.* — Beamish, Pickells. *Extraordinary.*— Cantillon. *Consulting.* — Daly. *Resident Apothecary.*—Downing.

LYING-IN HOSPITAL. *Physicians.*— Herrick, Copinger, Warren, Harvey.

GENERAL DISPENSARY, AND HUMANE SOCIETY. *Physicians.*—Sharkey, Copinger, O'Flyn, O'Conner, Smith. *Surgeon.*—Fowler. *Resident.*—Wall.

COUNTY INFIRMARIES —(1836.)

Meath Hospital, County of Dublin. *Physicians.* —R. J. Graves, W. Stokes. *Surgeons.* — P. Crampton, surg. gen.; Cusack Roney; R. Macnamara; W. H. Porter; M. Collis; J. Smyly. 1829.—Expenditure, 1308*l.*; admitted, in-patients, 804; died, 45; remaining, 53.

Antrim C. I., Lisburn. *Surgeon.*—W. Thomson; beds, 40.

Armagh C. I. *Surgeon.*—A. Robinson, M.D.; beds, 35.

Carlow C. I., *Surgeon.* —J. Rawson, M.D.

Cavan C. I. *Surgeon.*—G. Roe, Esq.; beds, 34.

Clare C. I., Ennis. *Surgeons.*—G. W. O'Brien, M.D.; S. Ewright; beds, 40.

Cork C. I., Mallow. *Surgeon.*—W. Galway, M.D.; beds, 20.

Donegal C. I., Lifford. *Surgeon.*—W. Stewart; average number of in-patients, 65.

Down C. I., Downpatrick. *Surgeon.*—G. Buchanan, M.D.; beds, 23.

Fermanagh C. I., Enniskillen. *Surgeon.* —G. A. Nixon, M.D.; beds, 38.

Galway C. I *Surgeon.*—A. Veitch, M.D.

Kerry C. I. *Surgeon.*—F. Crump, M.D.; beds, 23.

Kildare C. I., Beds, 32. *Surgeon.*— W. P. Geoghegan.

Kilkenny C. I. *Surgeon.*—T. Pack; salary, 100*l.*

King's C. I., Tullamore. *Surgeon.*—G. Pierce.

Leitrim C. I., Carrick-on Shannon. *Surgeon.*—W. Hutchinson, M.D.; beds, 32.

Limerick C. I. *Surgeon.*—T. Lysaght; beds, 61.

Londonderry C. I., Derry. *Surgeon.*— F. Rogan, M.D.; beds, 83.

Longford C. I., Dundalk. *Surgeon.*—G. B. West, M.D.; beds, 26.

Louth C. I., *Surgeon.*—E. G. Brunker, M.D.

Mayo C. I., Castlebar. *Surgeon.*—T. Dillon, M.D.; beds, 27.

Meath C. I., Navan. *Surgeon.*—Luke Byrom, M.D.

Monaghan C. I. *Surgeon.*—A. K. Young; beds, 36.

Queen's C. I., Maryborough. *Surgeon.*— J. Jacob.

Roscommon C. I. *Surgeon.* — R. J. Lloyd; beds, 44.

Sligo C. I. *Surgeon.*—T. Little; beds, 36.

Tipperary C. I., Cashel. *Surgeon.*— Russell, Heffernan; beds, 26.

Tyrone C. I., Omagh. *Surgeon.* — J. Maxwell; beds, 25.

Westmeath C. I., Mullingar. *Surgeon.* —J. Ferguson, M.D.

Wexford C. I. *Surgeon.*—Boxwell.

Wicklow C. I., at Wicklow. *Surgeon.*— W. Hamilton, M.D.

Wicklow C. I., Baltinglass. *Surgeon.*— W. N. Heath; beds, 10.

There are thirty-one County Infirmaries in Ireland, including the Meath Hospital, which is the Infirmary for the County of Dublin. Waterford possesses no County Infirmary.

No one, except a Member or Licentiate of the College of Surgeons in Ireland, can at present hold the office of Surgeon to an Irish County Infirmary: few of them reside in the Infirmaries.

In 1829, the total expenditure of the 32 county Infirmaries was 24,129*l.*; and of this, 8194*l.* for provisions; 2579*l.* for medicines; 6633*l.* for salaries and wages, The number of wards was 239; beds, 1142; the number of in-patients remaining, 952; the number discharged, 8911. Of 7072 discharged, 245 were dead. It is stated that 109,121 out-patients were treated at 27 of the Infirmaries.

LICENSED LUNATIC ASYLUMS.

[p. means Proprietor; s. Superintendent; and the figure indicates the number of persons for whom the license has been obtained.]

Bedford.—Kempston, J. Harris, p. 36.

Devon.—Churchingford asy. J. Rich, p., 6—Stoke Damerel asy. J. Lancaster, p., 100—Plympton asy. J. Duck, p., 36.

Dorset.—Halstock, Alice and Betsy Mercer, p., 9—Ford ho. Stockland, W. Spicer, p., 25.

Durham.—West Auckland asy. C. Eales, p., 40—Gateshead Fell asy., S. Kent, p., 50—Dunston Lodge asy. J. E. Wilkinson, p., 50—Bensham hos. P. Glenton, Newcastle-upon-Tyne, surgeon; and Fredk. Glenton, Bensham asy. p. s., 69—Wreckenton asy. J. Gowland, p., 40.

Essex.—Fair Mead ho. Waltham Holy Cross, M. Allen, M. D., p., 20—Leopard's Hill Lodge, at High Beach, M. Allen, M.D., p., W. Stockdale, s., 30—Springfield ho. High Beach, M. Allen, M.D., p,, E. Hall, s., 16—Maldon Lane, Witham, T. Tomkin, p., G. Wilson, s., 25.

Gloucester.—Whitehall ho. M. Taylor, p., 18—Northwoods, Winterbourne, H. H. Fox, M.D., p., F. Gower, s., Hawke, widow, s., 36—Fishponds, Stapleton, G. Bompas, M.D., p., 63—Fairford, A. Iles, p., 80—Ridgeway ho. N. Duck, p., 36—Castleton ho., Charlton Kings, W. Conolly, M.D., p., 24.

Hants.—Lainston ho. J. Twynam, M.D., p., 46—Carisbrooke, W. Hearn, p., T. Mursell, s., 43—Grove pl. Harrietta Middleton, p., M. Whetton, s., 79—Hilsea hos G. J. Scales, p., W. Robinson, s., 19.

Hereford.——Whitchurch asy. Llangarren, S. Millard, p., 35—Hereford asy. J. Gilliland, surg., p., 36.

Hertford.—Hadham pal. M. Hadham, J. Smith, p., 15.

Kent.—West Malling pl. J. Rix, p., 65.

Lancaster.—Blakeley, E. Edwards, 45—Newton, D. Haigh, 20—Billington, P. Kershaw, 20——Walton-on-the-Hill, L. Squires, and R. Squires, p., 45.

Leicester.—Great Wigston, J. Burgess, p., 20.

Lincoln.—Greatford and Stillingthorpe, F. Willis, p., 15.

Middlesex.—Established 1828. — Gore ho., Kensington, W. Ayres, p. s., 21—Holywood ho., Chelsea, M. Bradbury, p. s., 16—Holly ho., Hoxton, G. W. Burrows, p. s., 116—Retreat, Clapham, G. M. Burrows, p.; W. H. Pollard, s., 23—Northumberland, ho., Stoke Newington, R. Birkett, p. s. 21—Slerford ho., Battersea, T. Cann, p. s., 13—Weston ho., St. Pancras, W. Drummond, p. s. 17—Surrey ho., Battersea, W. Dobbs, p. s., 11—King's Road, Chelsea, W. C. Finch, p.; J. Mullins, s., 15—Kensington ho. W. C. Finch, p. s., 9—Fulham Road, M. Fleming, p. s., 6—Winclemore Hill, J. Holmes, p. s., 2—Althorpe ho., Battersea, P. Haines, p. s., 26—Turnham Green Terrace, J. T. Jackson, p. s., 2—Audley ho., Old Kent Road, J. Kirkman, p. s., 2—Hope ho., Hammersmith, J. M. Knight, p.; R. Jackson; Mary Toogood, s., 22—Melina pl., St. John's Wood Road, W. Larydon, p. s., 2—Lower Tooting, W. Moyes, p. s., 2—Beaufort ho., Fulham, C. Mence, p.s., 4—Brook ho., Clapton, E. T. Monro, p.: Pettingall, s. s., 32—Peckham ho., Peckham, C. Mott, G. J. Taylor, P. Armstrong, p.; B. Armstrong, s., 250—Hanwell, J. Kope, p. Miss Hall, s. 6—Gloster ho., Camden Town, J. Pell, p. s., 26—Moorcroft ho., Hillington, J. Stilwell, sen. and jun., p. s., 17—Castle Bar Ealing, W. Stilwell, p. s., 4—Blacklands ho., Chelsea, A. Sutherland, p.; A. Ward, s., 17—Fisher ho., Islington, A. Sutherland, p.; M. Collins, s., 25—Cowper ho., Brompton, W. H. Symmons, p. s., 9—Norman ho., Fulham, E. and A. Talfourd, p. s., 16—Sydney ho., Hackney Wick, E. F. Tuke, p. s., 5—White ho., Bethnal Green, T. Warburton, p.; C. Beverley, s., 409—Bethnal ho., Bethnal Green, T. Warburton, p.; M. Davis, s., 424—Hoxton ho., W. Wastell, p.; J. and E. Watts, s., 546—Whitmore ho., Hoxton, J. Warburton, p.; R. Benfield, 55—Pembroke ho., W Williams, p.; Appleton, Evans, ss., 71.

⁂ The list of private Lunatic Asylums for Middlesex we extract from a Parliamentary paper, (1830.) The list does not state the number of lunatics which the houses were actually licensed to receive, but the number of patients in the Asylum at that date. On application to Mr. Dubois, at the office of the Commissioners of Lunacy, John-street, Adelphi, for permission to correct the list up to the present time, we were informed that "he never gave information on any such subjects." We believe, however, the above list is correct in all the essential particulars.

Norfolk.—Loddon, R. Pedgrift, p., 30—Stoke Ferry, H. Steele, p., 10.

Oxford.—Witney, R. Batt, 20—Hooknorton, H. Tilsley, 80.

Salop.—Oswestry ho. T. Phillips, p. 52.

Somerset.—Bailbrook ho. S. Terry, p.

54—Brislington ho. F. K. Fox and C. J. Fox, p., 110—Fairwater ho. W. E. Gillett, p., 63.

Stafford.—Moat ho. Alice Woody, p., 30—Spring Vale asy. S. Glover, p. 32.

Surrey.—Stoke-next-Guildford, J. Randall, p 20—Egham, Sir J. Chapman, G. F. Furnivall, C. Summers, ps., R. Lloyd, 30.

Sussex.—Ticehurst asy. C. Newington, p., R. Harvey, s., 58—Ticchurst ho. C. Newington, p., 6—Ringmer asy. W. King, M. D., p., J. W. Ivory, s., 15.

Warwick.—Duddeston-hall, near Birmingham, T. Lewis, p., T. Jones, s., 70—Duddeston-hall, T. Lcwis, p., 90—Barford, T. Morris, p., 6—Henley-in-Arden, T. James, s. and P. Burman, p.,34—Henley-in-Arden, S. Brown, ps., H. Brown, s., 30—Wootton Wawen, Mary Gibbs, p., 10.

Wilts.—Calne, G. S. Ogilvie, p., 5—Laverstock, W. Finch, M. D., James Lacy, ps., 125—Fisherton Anger, C. Finch, p., 100—Box, C. C. Langworthy, p., 140—Fiddington, R. Willett, p., 100—Fonthill Gifford, J. F. Spencer, p., 18.

Worcester.—M. Ricketts and J. B. Steward, ps., 90.

York.—Sculcoates, J. Walker, 75—Summergangs, E. Gofton, 60—Nunkceling, J. and J. Beall, ps., 33—Hessle, Cath. A. Taylor, p., 20—Rillington, T. Allanson, p., 2.

Two in Ainsty of York—H. Mannering, H. B. Hodgson, 12.

Borough of Derby.—St. Werburgh, T. Fisher, p., 45.

Devizes.—New Park-street, T. Phillips, p., 80.

Hull.—Cannon, A. H., John and Mary Walker, s., 84—Marfleet-lane, Mary Gofton, s., 16.

Leeds.—Castleton Lodge, S. Hare, p., R. Lister, s., 30.

Leicester.—John Hill, 50.

Lichfield.—Sandfield S.Heighway,p.,33.

Newcatle-upon-Tyne. — Newcastle, N. T. Smith, p., 76—Belle Grove asy., J. Alexander, M.D. 20.

Norwich.—Two houses, Heigham, near Norwich, W. Wright, M.D., and W. Dalrymple, ps., 60—W. P. Nichols, J. W. Watson, ps.

Portsmouth.—Stamshaw, O. Trayes, p., 35.

Shrewsbury. — House of Industry, J. Jacob, p., 80—Kingsland Villa, R. Tipton, p., 6.

York.—W. Dawson, p., 10.
s., and Elliott,24.

DISTRICT LUNATIC ASYLUMS.

Name of Place.	When Opened	Counties intended for.	Beds.	Physician.
Dublin	1815	Dublin, Meath, Wicklow, and Louth..................	257	Dr. Jackson. Dr. Moltan.
Armagh	1825	Armagh, Fermanagh, Monaghan, Cavan............	122	Dr. W. Z. Kidd.
Limerick	1827	Limerick, Clare, Kerry...	150	Dr. O'Callaghan.
Belfast	1829	Down and Antrim..........	104	E. Thompson.
Londonderry	1829	L. Derry, Tyrone, Donegal	150	Dr. Rogan.
Carlow	1831	Carlow, Kilkenny, Wexford, and Kildare.........	104	Dr. White.
Maryborough	1832	King's Co., Queen's Co., Westmcath, & Longford	140	Dr. Jacob.
Ballinasloe	1832	Leitrim, Roscommon, Mayo, Sligo, and Galway........................	150	Dr. Heissie.
Waterford	1835	Waterford	100	Dr. Jones.
Clonmel	1834	Tipperary.......................	60	Dr. Sheil.
		Total beds......	1237	

DISTRICT LUNATIC ASYLUMS.

April 1, 1836-7, 1 Year.

Patients admitted, 778; discharged cured, 359; relieved, 85; incurable, 32; dead, 166. Average number in the asylums daily, 15,987. Expenditure, 28,149*l*.

REMARKS ON HOSPITAL MEDICAL STAFFS,

BY THE REV. CHARLES OXENDEN.

To the Editor of the British Medical Annual.

SIR,—If the unscientific contribution of a non-professional examiner of your progressively instructive Annual be deemed worthy of a place among pages, which are more replete with Hospital Statistics than those of any other British periodical; I shall feel happy in the opportunity of testifying the interest which I take in your efforts to promote improvement in the various departments of our public institutions for the relief of sick poor, by tendering for your insertion the following remarks on Hospital Medical Staffs.

Instituted and governed, as such establishments are, by persons who have more philanthropy than acquaintance with medical science, and are almost entirely ignorant of the details of hospital management, it is not to be wondered that they should all be characterised by many imperfections, and some by the most glaring abuses. Among these *imperfections*—I might say *abuses*—may be classed the unwieldy construction of the medical staffs of some of our county institutions. The cause of this may be traced *principally* to the ignorance of the governing body, above alluded to, in matters purely professional; and *partly*, to an unjustifiable feeling of delicacy towards the numerous resident practitioners of the respective towns. But, be this or that the cause, it is evident that, for the public good, the existing disparity in the labours and relative proportions of medical officers in the several provincial hospitals requires explanation, and, as I hope to be able to show, will admit of remedy.

The want of rational proportion in the medical staffs of the provincial hospitals of this kingdom—whether as compared with each other, or with those of the metropolis—has long been with me a subject, not so much of surprise, as of disapproval.

By referring to the second and fifth columns of my annexed table *A*, you will find, that, while in the year* 1830, when my Statistical Report of Provincial Hospitals was printed, *four* medical officers had the care of ninety-nine beds at *Leicester*, of one hundred beds at *Northampton*, and of one hundred and seventy beds at *Gloucester;* the *same number* of officers were appointed at *Hereford* to attend upon fifty-two beds, and at *Bury* upon fifty *only*. Again, while *six* medical officers were deemed ample for one hundred and five beds at *Norwich*, for one hundred and seven at *Salisbury*, for one hundred and twenty-four at *Leeds*, and for about one hundred and fifty at *Shrewsbury*;—*six* were also required for the charge of eighty-five beds at *Sheffield*, of seventy-nine at *Derby*, of sixty-five* at *Canterbury*, and of sixty-two at *Bath* (General Hospital).

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* My sole reason for making my Report of 1830 the basis on which to found these remarks is, that I could not without much difficulty and some expense have obtained the necessary data for 1836 or 1837. But as most, if not all the hospitals enumerated have, since the former period, advanced in efficiency, *pari passu*, I have reason to believe that the general comparison remains accurate; and that, *mutatis mutandis*, the calculations are equally applicable to 1838.

From these few examples, out of many which might be adduced, it will at once be seen that *there is no system whatever in the proportioning of medical staffs* throughout the provinces—that they have been the creatures of chance, originally determined, in all probability, by a reference to the number of resident practitioners in the town *at the period of institution*, without any regard to their *quantum of labour*, or to their *qualifications for office*. It was only upon this ground, I presume, that the good easy governors of the Kent and Canterbury hospital, in 1793, had so over-anxious a consideration for the welfare of their sick inmates, as to be induced to nominate two physicians and *six* surgeons ! besides a house-surgeon ! ! and superintending apothecary ! ! ! to co-operate in the restoration of their health; although, (*risum teneatis, amici !*) during the third year only 121 I. P. and 135 O. P. were admitted upon the books of the hospital ! ! ! ! I have no doubt, however, that kindly feeling towards the resident practitioners was in part, if not entirely, the cause of this staff deformity ; and, if so, I am disarmed of all but a smile. I must not, however, be supposed to *justify* the course pursued. *Personal* feeling and *private* interest should at all times give way to the public weal ; and where a charity is concerned, its *special* objects ought to be *rigidly adhered to*. In the case of hospitals, that object is the recovery of the sick poor by aid of a public purse, voluntarily replenished by the hand of individual benevolence ; and it should never be forgotten that this particular class of institution is founded, not for the *few*, but for the *many*—not for the whims of *governors*, but for the necessities of that afflicted and indigent portion of the *public*, in behalf of whom they bear rule—not for the *medical profession*, but for *diseased patients*. Whatever number, therefore, of medical officers can most efficiently, in all particulars, administer to the due care and treatment of the patients, *that number* should be preferred and adopted by the board of governors as *the only proper medical staff* ; and I cannot but consider that those governors, in whatever county living, who give a vote either for fewer or for more medical officers than are *boná fide* requisite, without duly and deliberately weighing the consequences, are acting without the caution befitting their responsible character, and in direct opposition to the best interests of the institution over which they have control.

But it will be asked, What *is* the *best* proportion for a medical staff? And this, I must allow, involves some difficulty in the reply. But though difficult, I do not think it desperate. For I am well persuaded, that, though it may be impossible to lay down a perfectly mathematical scale of proportion, adapted equally to all places and circumstances ; yet it *is* possible to *approximate* to such a scale, as will be calculated to insure a *fair promise* of beneficial results. This scale, however, must, to a limited extent, be made *variable*, by reason of certain *district* peculiarities, which operate to the increase or diminution of labour. In some hospitals, for instance, *surgical* cases will be found to predominate, but in most (including I. P. *and* O. P.) *medical;* while in others they will nearly *balance*. Again, in some localities hospital disease is more generally *acute*, than in others; requiring therefore more *daily* attendance, and occupying of necessity more professional *time* during treatment, and hence justifying a more extended *division* of labour. But, as a general system for adoption, I am disposed to think that hospital staffs, formed after the following scale, would best subserve the welfare of the patients, and facilitate the operations of the boards of management. Whether, or not, it would square with the interested speculation of individuals, enters not into my calculation :—

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* The number of beds at Canterbury, by the extensive and judicious alterations just completed, is increased to one hundred and twenty-five, conveniently; but no one has attempted to increase the medical staff, which is somewhat confirmatory of the truth of my remarks. In fact, we require but *two*, instead of *four* surgeons ; to which number I have twice ineffectually attempted to reduce them.

Proposed Number of Medical Officers for an Hospital, containing

From	1	Bed to	75—	Say 1	Physician,	1	Surgeon,	1	House-Surgeon.
—	76	—	125—	2	——	2	——	1	——
—	126	—	175—	3	——	3	——	1	——
—	176	—	200—	4	——	4	——	1	do., and 1 House Apothecary.
					&c. &c.				

In those neighbourhoods (in certain manufacturing districts, for example,) where *surgical* cases predominate, I should be disposed to add one surgical officer. And when out-patients (a large majority of whom will generally be found to be *medical*) are excessive, as at Bath, an additional physician would be advantageously appointed. Under any arrangements also for visiting *home* patients, further staff appointments may become necessary. These, however, are *exceptions* to, and do not militate against the principle of, my general scale.

After much consideration of the subject, I am inclined to think that in most instances a physician should have twenty per cent. more cases than a surgeon, (by which I mean sixty to forty. And for this reason, that his time in provincial towns will usually be less occupied by private practice ; and his ward cases, after the first or second examination, will generally admit of more expedition ; that is to say, if the labours of the surgeon be not, as they never should be, transferred to his pupils or to the house-surgeon. If, therefore, in the preceding table I have equalised the number of physicians and surgeons, it is from a belief, that upon an average of hospital cases, I. P. and O. P. together,[*] there will be nearly three hundred medical, to two hundred surgical patients.

My reasons for desiring to reduce to the above scale the acting medical staffs of our provincial hospitals are the following :—

1st. I believe that the greater the responsibility devolving upon any *one*[†] medical officer, the more sensible will he be of the importance of his situation with reference to the institution, and of the value of his professional preference by the public; each of which will not fail to stimulate to a zealous discharge of his duties, and to an anxious desire to retain the confidence of the governors.

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[*] Of I. P. *only*, the surgical cases prevail.

[†] Although for two or three conflicting reasons I should be sorry to rid the provincial hospitals altogether of what are falsely called the *gratuitous* services of the surgeons of the neighbourhood. Nevertheless I do not hesitate, at the risk of giving unintentional offence, to record my conviction, that, with one or two exceptions in favour of the larger towns, our institutions would be much *better conducted*, and the patients far more *satisfactorily attended*, and the operations more successfully per-

2. I believe that disease can nowhere be so well studied as in the wards of an hospital; and that, *cæteris paribus*, the degree of skill attainable by any one individual will be proportionate to the number of cases under his own treatment. (I speak only of *intelligent* and *observant* practitioners. Experience will do little for *the rest.)*

3. I believe that the interest, which a *really* scientific man takes in his profession, will vary with the opportunities afforded to him of gratifying his thirst after *increased* science; and, therefore, that the more beds he has to attend, the greater will be his interest in their results.

4. I believe that if a physician or surgeon have *twenty* or *thirty* beds occupied by various forms of disease, he will be more disposed to attend *frequently*, (if not *daily*,) than if only *five* or *ten* beds were under his charge; because in the one instance he will always have *some* cases possessing morbid interest, and, therefore, *professionally* repaying him for his attendance; while in the other the probability of such cases will be so reduced, as often to furnish a silent excuse for deferring a visit to the hospital until a more *convenient season.*

5. I believe that it is of considerable importance that the *operations* should be limited to *as few hands as possible*, in order to insure a greater degree of skill (if not to avoid positive unskilfulness) at the table.

6. I believe that the difficulty in some hospitals of effecting satisfactory attendance, generally; and of obtaining periodical and occasional *bona fide** consultations, in particular; would be materially lessened, if not entirely removed, by a *diminution* in the number of medical officers.

7. I believe that, in small provincial towns, the number of resident surgeons *really qualified* by experience, education, and professional *esprit*, to succeed to an hospital appointment, is necessarily fewer than in the large manufacturing towns, although the hospitals of the former have a larger proportion of medical officers. And therefore, that the small town of *Bury*, for instance, cannot keep up a satisfactory supply of *three* hospital surgeons, or *Canterbury* of *four*; as surely as Leeds or Nottingham can furnish *three*, or Birmingham *four*, or even Manchester *six*.

These are some of my reasons for desiring to *systematize* the medical staff. But I beg to be understood as not intending to speak disparagingly of the abilities of any officer of any hospital, in my endeavour to show that the patients will generally be better treated and the affairs of

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formed, by ONE *highly salaried* RESIDENT *surgeon of acknowledged skill, than by any number of local practitioners.* I need scarcely add, that the great superiority of surgical science and operative skill in London over that of the provinces, is a sufficient reason for limiting this remark to the latter localities.

* I could name at least one hospital, where physicians have hald satisfactory consultations periodically and p. r. n.: while the consultations by the *more numerous* surgeons have been, and still are, a disgrace to the institution to which they belong, as well as to themselves. *They exist but in name.* When will Governors awake from their slumber—become enlightened—and do their duty?

the hospital more uniformly conducted, where the medical staff is reduced to the *lowest number consistently with reason.*

It was under a conviction of the legitimacy of the above arguments, that I attempted at our last and preceding Easter Boards to reduce *prospectively* (i. e. after the retirement or decease of a portion of the present officers) the *surgical* department of the Canterbury hospital from *four* to *two*. The tables *A* and *B*, annexed, were prepared by me, though in a different form, for these occasions. From these I undertook to prove the marked disproportion of our own medical staff, both in *itself* and *comparatively with others.* I proved that, at the period of compiling my "Statistical Report of the principal Provincial Hospitals in England," each of our *four* surgeons on an average *admitted* only 62 in-patients and 34 out-patients *in the course of the year;* whereas at Leeds each surgeon admitted 402 in-patients and 861 out-patients, or *twelve times as many;* while the average of twenty principal hospitals was 166 in-patients and 360 out-patients, or more than *five times the number*, for each surgeon. So much for the *variety* of cases.

But I went further, and exhibited the *average daily labour.* I proved that each of our surgeons had *only* a daily average of 6 I. P. and 6 O. P. under treatment! whereas at Gloucester 66 I. P. and 30 O. P., or *eight times the amount of labour*, fell to the share of either surgeon; while the average of twenty hospitals was 19 I. P. and 31 O. P. constantly on the books for each surgeon; or *three times as many* IN and *five times as many* OUT, producing a corresponding excess of daily labour.

One step further I ventured to proceed; and that was to show, by reference to the operation book, that the number of capital operations during five years, viz., from May 1832 to April 1837, amounted only to *twenty-six*, or 5.1-5 for each year. So that the average important operation-practice for each of our *four* surgeons was a small fraction over *one operation and a quarter* per annum! But who could blame a surgeon for any want of dexterity with such scanty opportunities of acquiring confidence and skill? Who could be surprised at hearing of the most unsuccessful cases of operative surgery under circumstances so favourable to their production? But who also could have supposed, that, through the antiquated prejudices of governors, or their fear to offend, I should have failed (though supported by one physician and two surgeons) in carrying the following resolution:—

"Resolved—That in order to render the medical staff of this hospital better proportioned to its labours; and with a view also to assimilate it more nearly to that of the other provincial hospitals; no election for a surgeon shall again take place, until by death, retirement, or otherwise, the number be reduced to one. And that from that time forward the medical staff shall consist of *two* physicians and *two* surgeons only, besides the house-surgeon, and such consulting physicians and surgeons as the governors may from time to time elect, as an honorary distinction for past services. Provided that nothing contained in this resolution shall be construed to affect the annual re-election of either of the present surgeons of the institution."

Intimately connected with the *subject* of medical staffs is the mode of

TABLE A.

Showing the number of Physicians and Surgeons attached to each of Twenty principal Provincial Hospitals; the amount of Beds; the number of Patients treated in one year by each Physician and Surgeon; together with the average daily number under treatment by each. Compiled by the Rev. Charles Oxenden, from his Statistical Report of Provincial Hospitals, published 1830.

Hospital or Infirmary.	No. of Beds	Numb. of			Each Physician's						Each Surgeon's						REMARKS.
					Yearly Average of			Daily Average of			Yearly Average of			Daily Average. of			
	2.	Physicians. 3.	Surgeons. 4.	Total. 5.	I. P. 6.	O. P. 7.	Total. 8.	I. P. 9.	O. P. 10.	Total. 11.	I. P. 12.	O. P. 13.	Total 14.	I. P. 15.	O. P. 16.	Total. 17.	
Bath……………H.	62	3	3	6	80	2053	2133	7	*	*	100	1346	1446	8	*	*	* No data are derivable from the Annual Reports of these Hospitals, with reference to these particulars. It would facilitate very considerably the object, and lessen the labours, of Statistical Writers in this branch, and would tend also to much public good; if the Annual Reports entered more into detail with regard to the Patients, Salaries, Servants, and quantities, as well as cost, of each article of consumption. A system much neglected by most Hospitals. A SIDE column should also be shown, containing the expenditure of the preceding year, under each department, for purposes of Comparison.
Birmingham ……H.	163	4	4	8	148	119	167	13	*	*	274	596	870	24	*	*	
Bury……………H.	50	1	3	4	152	340	492	20	56	76	49	46	95	6	8	14	
Canterbury………H.	65	2	4	6	127	184	311	16	30	46	62	31	96	6	6	12	
Chester…………… I.	*	3	3	6	84	583	667	7	38	45	139	303	442	12	19	31	
Derby …………… I.	79	3	3	6	87	181	268	9	41	50	132	102	234	14	23	37	
Gloucester ……… I.	170	2	2	4	102	157	259	28	76	104	242	63	305	66	30	96	
Hereford ………… I.	52	2	2	4	54	224	278	6	30	36	113	121	244	12	18	30	
Leeds …………… I.	124	3	3	6	73	519	592	7	*	*	402	861	1263	36	*	*	
Leicester ………… I.	99	2	2	4	250	643	893	15	*	*	253	396	649	19	*	*	
Manchester……… I.	184	6	6	12	89	1591	1680	8	*	*	192	1287	1479	17	*	*	
Newcastle……….. I.	*	4	4	8	183	87	270	*	*	*	119	142	261	*	*	*	
Northampton…… I.	100	2	2	4	182	330	512	20	29	49	273	496	769	30	43	73	
Nottingham ……. I.	91	3	3	6	104	566	670	13	203	216	89	223	312	11	80	91	
Salisbury………… I.	107	2	3	5	184	472	656	18	36	54	184	197	381	18	15	33	
Salop …………… I.	150	3	3	6	99	263	362	10	*	*	177	305	482	18	*	*	
Sheffield………… I.	85	3	3	6	165	656	821	*	*	*	139	273	412	*	*	*	
Stafford ………… I.	78	2	3	5	137	268	405	17	*	*	102	157	259	12	*	*	
Winchester………H.	96	3	3	6	104	229	333	13	118	131	142	107	219	16	55	71	
Worcester…………I.	100	3	3	6	115	161	276	16	57	73	141	142	283	19	50	69	

TABLE B., *arranged, for convenience of Comparison, from* TABLE A.

Physician's Yearly Average of				Each Surgeon's Yearly Average of				Each Physician's Daily Average of				Each Surgeon's Daily Average of			
	I.P.		O. P		I.P.		O. P.		I. P.		O. P.		I. P.		O. P.
Leicester	250	Bath	2053	Leeds	402	Bath	1346	Gloucester	28	Nottingham	203	Gloucester	66	Nottingham	80
Salisbury	184	Manchester	1591	Birmingham	274	Manchester	1287	Northampt.	20	Winchester	118	Leeds	36	Winchester	55
Newcastle	183	Sheffield	656	Northampt.	273	Leeds	861	Bury	20	Gloucester	76	Northampt.	30	Worcester	50
Northampt.	182	Leicester	643	Leicester	253	Birmingham	596	Salisbury	18	Worcester	57	Birmingham	24	Northampt.	43
Sheffield	165	Chester	583	Gloucester	242	Northampt.	496	Stafford	17	Bury	56	Worcester	19	Gloucester	30
Bury	152	Nottingham	566	Manchester	192	Leicester	396	Worcester	16	Derby	41	Leicester	19	Derby	23
Birmingham	148	Leeds	519	Salisbury	184	Shrewsbury	305	Canterbury	16	Chester	38	Salisbury	18	Chester	19
Stafford	137	Salisbury	472	Shrewsbury	177	Chester	303	Leicester	15	Salisbury	36	Shrewsbury	18	Hereford	18
Canterbury	127	Bury	340	Winchester	142	Sheffield	273	Birmingham	13	Hereford	30	Manchester	17	Salisbury	15
Worcester	115	Northampt.	330	Worcester	141	Nottingham	223	Nottingham	13	Canterbury	30	Winchester	16	Bury	8
Winchester	104	Stafford	268	Sheffield	139	Salisbury	197	Winchester	13	Northampt.	29	Derby	14	Canterbury	6
Nottingham	104	Shrewsbury	263	Chester	139	Stafford	157	Shrewsbury	10	Stafford	*	Stafford	12	Stafford	*
Gloucester	102	Winchester	229	Derby	132	Worcester	142	Derby	9	Leicester	*	Hereford	12	Leicester	*
Shrewsbury	99	Hereford	224	Newcastle	119	Newcastle	142	Manchester	8	Birmingham	*	Chester	12	Birmingham	*
Manchester	89	Canterbury	184	Hereford	113	Hereford	127	Leeds	7	Sheffield	*	Nottingham	11	Sheffield	*
Derby	87	Derby	181	Stafford	102	Winchester	107	Chester	7	Shrewsbury	*	Bath	8	Shrewsbury	*
Chester	84	Worcester	161	Bath	100	Derby	102	Bath	7	Manchester	*	Bury	6	Manchester	*
Bath	80	Gloucester	157	Nottingham	89	Gloucester	63	Hereford	6	Leeds	*	Canterbury	6	Leeds	*
Leeds	73	Birmingham	119	Canterbury	62	Bury	46	Newcastle	*	Bath	*	Newcastle	*	Bath	*
Hereford	54	Newcastle	87	Bury	49	Canterbury	34	Sheffield	*	Newcastle	*	Sheffield	*	Newcastle	*
Average	170	Average	481	Average	166	Average	360	Average	13½	Average	65	Average	19⅝	Average	31½

* No Data to be derived from the Annual Reports of these Hospitals with reference to these particulars.

remunerating them for their services. I am not aware of an instance, in which either physicians or surgeons receive *direct* pecuniary compensation for their attendance upon hospital patients. And whatever may be the growing opinion on the propriety of such a measure, I am not prepared to become a convert to the innovation. I have weighed the subject with some nicety, and without the slightest pre-existent prejudice; and from all that I have seen of the working of hospitals, and from all the arguments that I have heard or can conceive in favour of such a change, I am as yet unable to discover either the *advantage* or *necessity* of bestowing such pecuniary remuneration, upon what are *called* the "gratuitous officers," as would be within the limited income of the generality of our hospitals. I do not for a moment doubt, that, if 200*l.* per annum could be spared for each physician, and 100*l.* for each surgeon, and if the election* for these offices were conducted upon *a*

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* I cannot conceive anything more prejudicial to the interests of an hospital, than the usual mode of electing its officers; both *paid* and *gratuitous.* There is no necessary analogy between the election of an M.P. and that of an M.D. Connected with the former there is usually a test by which most electors can decide at once how they ought to vote. The candidates are generally of opposite political sentiments, which at once simplifies the choice of each elector. The Whig is supported by Whigs, the Tory by those who profess the same political creed with himself. But in the case of a contested election for a *physician*, (for instance,) what test have we of the respective merits of the several candidates, but that which is derivable from their written *testimonials*, coupled with any other collateral information obtained through private sources, or from personal knowledge of the parties? But is there one governor in every ten, who takes *any pains to ascertain* the real merits of each candidate? Or is there one in twenty, who is *competent*, with the imperfect means that are alone in his power, to weigh with any *accuracy* the *comparative* talents of any three, or four, or more competitors? No—the plain truth is, that, with a few exceptions, the governors exhibit but little interest, abstractedly, in the result of an election. They take no trouble to induce skilful men to *offer* themselves, or to *support* them when *brought forward.* So that unless one or two influential gentlemen take a *very decided and active part* in favour of the fittest candidate, his success is not less uncertain than the drawing of lots. For what is the progress of an election of this nature? Is it not frequently this? a vacancy occurs, (perhaps unexpectedly.) For many days it is known only within the limit of a few miles. Local physicians, who have been nearly starving for lack of patients, make a desperate effort to obtain the post of honour with its consequent emoluments. Private friends exert themselves, not on *public*, but on *private* and *personal* grounds. Distant governors are quickly applied to for their proxies; and no time is lost in endeavouring to obtain favourable promises from the ladies, and flattering hopes from all. So that in the course of a week or ten days, by the kindness of some, the apathy of many, and the ignorance of more, at least one-half of the effective votes are engaged to the first applicant or applicants. And, now, down comes a physician from London, or from some distant town, with the most satisfactory testimonials, and of superior talent. But it is too late—the election day arrives—he obtains a number of votes from those governors who have preferred waiting, to see who *most deserves support*—but it is all in vain. He returns to whence he came, disappointed by defeat, and the hospital suffers in the loss of skill. This is no exaggeration. It is pure matter of fact. And now my remedy for this is simple and rational. When a vacancy occurs among the hospital officers of *every grade*—let the board immediately advertise it in the papers, and medical weekly periodicals; fixing the election to take place *six weeks hence.* Let a general board of governors be specially summoned, for the purpose of appointing a committee of thirteen, whose duty shall be to *examine minutely*, (sitting twice a week,) the testimonials and qualifications, as well private as public, of *all* the candidates. At the expiration of the six weeks, let another board of governors be convened for the purpose of receivng the report of the committee, containing the name of the candidate upon whom their choice has fallen—and the general board shall formally elect and

sounder and more satisfactory principle, the practice of the smaller hospitals would, in the course of time, become *much* improved; from the opening which it would afford for more, as well as more talented, competitors for each vacant appointment. If, therefore, the funds of an institution would admit of devoting so considerable a sum in the shape of medical salary upon all subsequent appointments made under a better system of election, the scale of hospital talent would progressively rise, and corresponding benefits would be experienced not only by the inmates of the wards, but by the surrounding neighbourhood. If, however, the remuneration of the medical officers were to be so reduced, as to quadrate with the disposable means of 19-20ths of the hospitals of the present day, I am satisfied that *no advantage whatever would arise to the institution.*

Neither is it, in any respect, *necessary.* It is absurd to suppose (though some *have* imagined it) that the governors would possess more power, and be more free to exercise legitimate authority over the physicians and surgeons, while under the receipt of an annual salary. In every hospital there are printed laws and regulations relating to the duties of the medical staff, which they tacitly *acknowledge* by accepting office; and which they are, by honour and appointment, as strictly bound to perform in the spirit in which they were intended, as if they had entered into a written compact to that effect. Nor would the fact of their being a *salaried* body render them a whit more amenable to the board of management. The same governing power, by which in the one case they might be deprived of their salary, could in the other equally inflict upon them the loss of an honourable office. And to suppose that a physician, in consideration of (say) 100*l.* a year, or that a surgeon for 50*l.*, would be more *disposed* to discharge his duties faithfully, is to deny to either all pretension to honourable notions, and to regard them as wholly insensible to the dictates of conscience. It appears, therefore, evident, I think, that it is not *necessary* to give salaries to the medical officers in order to secure from them *the due performance* of their responsible duties. Neither is it *at all necessary*; as an *equitable remuneration.* They are all, physicians equally with the surgeons, *amply* remunerated in a *pecuniary* sense—not directly, but indirectly—not by the actual gold of the hospital, but by the neighbouring gold, to which that hospital introduces them. Will any one presume to say, that in a county town, whose population is 10,000 or 15,000, a non-official *physician* would have *one-half* of the profitable practice enjoyed by the hospital physician of the same place? And is it not notorious to every one, that the *surgeons* of a sick institution,

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appoint such preferred person, unless disapproving of the choice—in which case it shall have the power of a *veto*—and shall immediately proceed to appoint by ballot, from those present, a *second* committee of thirteen, inclusive of one of the original committee, for chairman—which second committee, so appointed, shall sit twice a week for two weeks, (if necessary,) and having made a careful selection, their decision shall be final.

I am convinced that this is the only way of securing the return of the *fittest* candidate—and if governors are desirous of proving that they are more alive to the *public good*, than tenacious of a little private patronage, they will no longer doggedly adhere to a system, which is bad in principle and worse in practice.

excepting under very peculiar circumstances, attend the most wealthy, and more respectable portion of the neighbourhood? Is it not, moreover, equally notorious, that they frequently receive consultation fees on the strength of their supposed superiority in the science and practice of surgery? Is it not also a fact, that *much larger* premiums for pupils are required and obtained by those surgeons who are connected with hospitals, from the conceived advantages derivable from their enlarged opportunities of practical instruction? I need not press the argument derivable from the *eager competition of candidates at every vacancy*. Let these suffice.

Hoping that I have stated my opinion and remarks on matters connected with our provincial hospital staffs not less fairly than explicitly,

I remain, Sir, Yours faithfully,

Bishopsbourne Rectory. CHARLES OXENDEN.

BRITISH MEDICAL ASSOCIATION.

WE gave some account of this Association in the last Annual. It has since been indefatigably employed in promoting the interests of the profession. The Poor Law engaged its attention during the early part of 1838; and the Council of the Association is now directing all its energies to the question of Medical Reform. Reformers can do nothing but by association; and great advantages must arise from the junction of Branch Associations with the Metropolitan Institution. We must add, that Medical Reformers are greatly indebted to the honest, liberal, and enlightened President of this Association. By the laws of the Association—

1.—All legally qualified practitioners in medicine, that is, graduates, members, or licentiates of any medical college or corporation, are eligible as Members on proving their qualification—by reference to the published lists, or otherwise.

2.—The names of Members can be proposed and registered at all Meetings of the Association or of the Council.

3.—Two General Meetings of the Association are held annually; the first in the month of March, for general business, alteration of the laws, &c.; the second, the anniversary, on the 30th of September; but an Extraordinary General Meeting may at any time be convened by twenty Members, on their giving ten days notice.

4.—At the Anniversary Meeting, the result of the Ballot for the Council is declared; the Council report their proceedings for the past year, the state of the finances, &c., and the general business of the Association is transacted;—the Annual Oration is then delivered, after which the Members dine together.

5.—The Council meet on the second and fourth Tuesday of each month throughout the year, at seven p.m., and an ordinary Meeting is held on every second Tuesday at nine o'clock, after the Council Meeting, at which all Members may attend, and bring forward any business which they may wish to propose.

6.—All meetings of the Association and Council (except the anniversary) are held at Exeter Hall, where communications on subjects affecting the interests of the profession, may be addressed to the Honorary Secretaries.

HISTORY OF THE MEDICAL PROFESSION,

AND ITS

INFLUENCE ON PUBLIC HEALTH, IN ENGLAND.

INTRODUCTION.

The History of Medicine is strictly the history of the facts and principles which have been successively discovered in that science; the History of the English Medical Profession is here understood to imply the history of a social institution, established to preserve the health and to alleviate the physical sufferings of the nation. The state of Medical Science is only one of the elements of the inquiry; for the problem is—given a certain quantity of science, how has that science been brought into contact with the people, by what class of persons, by what institutions, and with what effect? It is interesting, as an object of philosophical research, to investigate the state of health, to follow its progress through centuries of transition from barbarism to civilisation, to ascertain how the life of the race has been affected, for good or evil, in changing circumstances; and, to examine the rise, education, and efficiency of the men set apart to prolong life, and to increase vigour, amidst constant causes, from within and without, of decay and destruction. The history of the medical profession also possesses a two-fold importance at the present moment, when the reform, the abolition or reconstruction of existing institutions is contemplated.

This history will be restricted to the people of England: and from the beginning down to the present period, be divided into five periods. A rapid sketch of the state of medical science in each period is drawn, and it must be borne in mind, that before the Anglo-Saxons realised an independent existence, or left the forests of Germany, or obtained a glimpse of enlightenment, medical science existed. The works of Hippocrates and Galen were extant; but the pure Greek medicine was not the medicine of the Saxons—the medicine with which we have to do. If it had been placed within their reach, that was too simple and true in one sense, too refined in another, for barbarian perception and practice. During the first seven or nine centuries we observe nothing but the introduction and extension of foreign science; another era began with Harvey and Sydenham. English science rose, in the 16th century, to the full scope and measure of the ancients; in the seventeenth century it passed the line of the Greek learning, and the tide rolled onwards, and will roll on still, into the illlimitable future. But whenever future generations gaze back on the past and the glimmering morning of the art of healing, they will there behold the imperishable figures of Hippocrates and Galen, of Harvey and Sydenham.

The Education of the members of the profession is a subject of great interest, and pains are taken to throw on it as much light as can be gathered from rather meagre sources. The remuneration and the nature of the practice are examined; and the uneducated, irregular practitioners are described as, till latterly, they attended the great bulk of the people. The history of the Medical Corporations is not the history of the medical profession; but the origin and influence of these institutions are investigated, and many apparent anomalies disappear when facts are followed from the beginning, in the order of their generation, and placed in their natural relations. To consider the events of one age, without any reference to preceding events, and to compare the past state of institutions with the present, instead of the past state of society, would lead to results at which some would be astonished, some amused. A philosophical method affords more instruction.

In this department I am more or less indebted to Sprengel, Hecker, Freind, Aikin, Wilcocks, and other writers on medical affairs; to Sharon Turner, Hume, Henry, Robertson, Roetteck, and other historians; but the materials of the article are principally derived from the original sources. The contemporary writers are, when it is practicable, quoted, consulted, and referred to in the notes, so that any error into which the writer is led may be readily detected. Many of the facts and illustrations can only be found in the poets and the general literature of the early ages; these will therefore be necessarily cited.

The effect and value of the medical profession are measured by the state of public health, which is always relative, depending on circumstances and passions which science can and cannot control. Life and health are now accurately expressed, and compared in numbers; but no data of this exact kind exist in early history, and we are left, like the political historian, to probabilities and certain striking effects. Epidemics possess this character; and as they always bear a certain relation to the mean mortality, rising and falling with it, may be viewed as its adequate representatives. Epidemics are, however, but incidentally treated. Some advantage has been taken of the recorded reigns of English sovereigns, and many facts, illustrative of medical practice, will be taken from their private history, and the history of noble families; but no opportunity will be lost of throwing light upon the sanatory condition of the common people, slaves or freemen: for, we must ever bear in mind, that the gifts of healing were not given for a class, but for the nation, that the disciples of this Saviour have not been sent merely to visit palaces and purple chambers, but to carry balm and life to the hearths of labourers, artizans, and citizens—to the mothers and fathers of England; and that there is the criterion of public health—as there are the materials of the national glory.

CHAPTER I.

A.D. 1066.

Medicine of the Ancient Germans—Medical writings of the Anglo-Saxons—Education—Theodorus—the Roman Missionaries decry the Saxon medicine—case of Heriburg's daughter—the derivation of Laece—the leech of Bishop John—Political events, and the state of Health—Famines—Plagues—Mean duration of Kings' reigns.

The medical knowledge of the Saxon hordes, before they left Germany, is involved in obscurity. But the present state of the healing art among tribes in the same stage of civilisation, enables us to conceive its general outlines with sufficient accuracy. When Tacitus wrote, the Germans had two professions, theology and arms. The women followed the armies to the field, and dressed the wounds of the combatants: *ad matres, ad conjuges vulnera ferunt, nec illae numerare, aut exsugere plagas pavent.*[*]

Instead of deriving medicine from the gods, we may rest satisfied with tracing it to the mothers and wives of the sick and bleeding warrior. Medicine, in its early unscientific state, consisted essentially of nursing; it is, therefore, natural that nurses should be the first physicians; nor is the acute suggestion of Hippocrates unsupported, that the first steps in medicine originated in the inventions of cookery, and the attempts to adapt food to the wants of the body in health, and disease.[†]

The ancient Germans appear to have possessed no drug of great power; or at least not to have arrived at the proficiency in compounding poisons which had been attained in parts of the Roman empire. A prince of the Chatti promised to destroy Arminius, provided the Roman senate would supply him with poison.[‡]

After the subjugation of the Britons, and the introduction of Christianity, medicine constituted a considerable share of the Anglo-Saxon learning, as is evident from the comparative number of manuscripts on medical subjects. These manuscripts are chiefly translations; but there are allusions to spells and superstitions which prove them to be partly indigenous productions. The doctrines which they display are of a rude character, and would require but a very simple capacity and instruction to render them available in practice.

A manuscript, in the British Museum, will illustrate this early medical literature: the Latin version was one of the chief therapeutic guides in the middle ages, and one of the earliest works printed on the revival of learning. It is referred, by a prevalent pious fraud, to a high source, and is entitled, "*Herbarium Apuleii Platonici quod accepit ab Escolapio et a Chirone centauro Magistro Achillis.*"[§]

The manuscript is beautifully written, and contains 130 coloured figures of plants, while a copious index exhibits the diseases for which each herb is a remedy. The Betonica constitutes, in itself, a materia medica; it is a specific for forty ailments. The mugwort will furnish a less prolix specimen.

MUGE WYRT.

Theos wyrt the man artemisium and othrum naman muegwyrt nemneth bith cenned on stannigum stowum and on sandigum. Thonne hwa sith faet onginnan wille thonne genime hehim on hand thas wyrte artemisia and haebbe mid him thonne ongyt he na mycel togeswynce thaessithes; and eac heo afligth deoful seocnyssa and on tha huse heo forbyt yfele lacnunga and eac heo awendeth yfelra manna eagan.

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[*] De Moribus Germ. c. 3.

[†] Hip. De Veteri Medicina.

[‡] Reperio apud scriptores senatoresque eorundem temporum, (a. u. c. 772.) Adgandestrii principis Chattorum lectas in senatu literas, quibus mortem Arminii promittebat, si patrandae neci venenum mitteretur: responsumque esse, non fraude, neque occultis, sed palam et armatum populum Romanum hostes suos ulcisci. —*Tacit. An.* l. ii., c. 12.

[§] Cotton. Vitellius c. 3, fol. 19, in vellum, 1 fol. 4. British Museum.

Instead of the Anglo-Saxon, I will give an English translation of this and the subsequent paragraphs.

This herb, called artemisium, mugwort, and other names, is found on stony and sandy places. If any one going a-foot will carry the artemisium in his hand, and have it with him, he will not feel weary of the way, [a useful property to the pedestrian.] It drives away epilepsy (deoful seocnyssa,) and hung up in the house it prevents the effects of poisons: it also averteth the evil eye.

For pain in the bowels (with innothes sare.) Take the same herb, rub it to dust, mix it with new beer (beor,) and drink. It soon relieveth the bowel pain.

For sore feet (fota sare.) Take the herb, bruise it with lard (smeruwe,) and lay it on the sore feet.

For pain in the bladder (blaedran sare,) and what is called *dysuria* (gemicgan). Take the herb, mugwort, and drink; some people will say with water, others with wine.

For pain in the hips (theora sare.) Take this herb, bruise it with lard, and wash it well with vinegar (ecede;) then let it be bound on the painful part, which on the third day will be sound (sel.)

For sprains and swellings (*sina sare* and *geswel.*) Take the artemisium, rub it with oil (ele) well boiled (gewylde,) and lay it thereupon. It healeth wondrously.

Whoever is heavily afflicted with *gout* (fot adle,) let him take this herb; choose the root, and eat with honey; then will he eftsoons be healed and cleansed, so as to be astonished at its great power. If any one be threatened with fever (feferum,) take the herb, boil (seaw) it with oil, and anoint (smyre) the body: it soon driveth fever away.

The *Liber medicinalis* which Bald composed at the command of Cild, in Anglo-Saxon, is cast in a different mould: the diseases are arranged in the order of the parts affected, as the head, the stomach, the liver; and the remedies follow.—Vid. *Wanley Ant. Lit. Sep.*

In addition to the *medicina ex herbis*, there was a *medicina ex animalibus:* the animals are depicted in the MSS., and discussed after the same manner as the plants. In the latter days of this period, several medical works accumulated in the libraries. An Anglo-Saxon, writing to Boniface, requests some books *de medicinalibus;* such books, he said, were plentiful in England, but the *foreign* drawings in them were unknown to his countrymen, and difficult to acquire.[*] Wanley has enumerated several Anglo-Saxon recipes: and charms to staunch the blood in battle.

The clergy at the cathedral schools and monasteries were the first medical students. Theodorus, a learned Greek, made Archbishop of Canterbury, A.D. 658, lectured to numerous disciples on music, astronomy, arithmetic, ecclesiastical discipline, and medicine.[†]

The following specimen of the medical teaching and physiology, is from a Saxon tract, by Bridfrithum Ramesiensem:[‡]—

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[*] 16 Mag. Bib. Pat. Cited by Turner.

[†] Bede. Ec. Hist. 4, c. 12.

[‡] Somner verb. Tima. Cited from a MS. in the Ashmolean Library.

There are four seasons (Timan); Spring (Lengten), Summer, Autumn (Haerfest), and Winter; and each has its likeness in man, that is, childhood, youth, manhood, and old age. Springtime and childhood correspond: youth and summer are similar; autumn and manhood agree; winter and age are fallings off. Spring is wet and warm; and the spring air is damp and warm. Childhood is warm and moist; and the blood is warm and watery. *Aestas* is summer: it is warm and dry (wearme and drigge.) Youth also is warm and dry. Colera rubra, or red colours, are in favour in summer; they are warm and dry. Autumnus, or Haerfest, is in its kind cold and dry. Earth is cold and dry: manhood is dry and cold. In autumn, dark colours prevail; they are dry and cold. *Hiems* is winter: it is cold and damp; water is cold and damp: thus are old men cold and phlegmatic (snoflig.) Coughs and discharges trouble the old and weakly.

The Roman missionaries appear to have made use of their medical skill in converting the Saxons, who, while they were called upon to abandon the faith, were also expected to forget the physic of their forefathers. There were many relapses into the old practices; but, happily, the new and the old doctrines easily amalgamated, and the contest ended in a natural compromise. In a severe epidemic which reigned over several provinces of England, many believers profaned the faith by wicked works, and some neglecting the sacraments of Christianity, ran after the erratic medicines of idolatry; as if, says the ecclesiastical historian, charms, phylacteries, or any secret of demoniacal art, could control a plague sent by God the creator.*

The venerable Bede gives a lively sketch of the practice of medicine among the Anglo-Saxons in the following case. Bercthum is recounting the journeyings of Bishop John, (A. D. 685.) "We arrived at Wotton, in Yorkshire, and were gladly welcomed at the nunnery by the abbess, Heriburg, who pointed out one of the virgins, her carnal daughter, suffering under the heaviest anguish. She had been lately bled (phlebotomata) from the arm, and was seized, when in study, with sudden pain, which rapidly increasing, the wounded arm swelled so much, that it would not bend on the humerus, and could scarcely be encompassed by the two hands. She was now lying in bed, and seemed about to die from the excess of pain. The abbess therefore entreated the bishop to enter her apartment, and bless her, as she believed that his benediction or his touch would make her better. He inquired when the maiden was bled, and finding it was *in quarta Luna*, he said: 'Very unwisely and unlearnedly hast thou done to bleed *in quarta Luna*; for I remember Archbishop Theodore, of blessed memory, saying that phlebotomy was perilous when the light of the moon, and the ocean-tide were waxing: and what can I do for the maiden if she is dying?' The abbess in the end prevailed upon the bishop to visit her languishing daughter, whom she loved more than a city. He went with me (Bercthum) where the virgin lay: he prayed over Quoenburg, and departed, blessing her. While we were at dinner, she sent to request me to return quickly, which I did, and met her smiling as one in health.

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* Bede Vita, Cuthbert, A.D. 685.

While I sat by her she said, '*Vis petamus bibere?*' 'I will,' I replied, 'with great joy, if thou canst;' and while we both drank from the proffered cup, she said, 'After the bishop's prayer and benediction I immediately became better. I recovered my strength, and lost all pain as soon as the bishop left me, though the swelling remained.' We departed. The pain and horrible swelling subsided. The maiden was snatched from death, and gave glory to God and his servants."*

Besides ecclesiastics, physicians, *medici*, *laece*, are often mentioned by Saxon writers. *Laece* originally signified host as well as physician; thus in the Saxon translation of Luke x. 35, the good Samaritan took the wounded man, not to an inn, but to a *laecehus*, and paid the *laece*. Did the Saxon *laece* receive patients into his house? or was he called host because he took care of patients in sickness? The connexion of host (Hospes) and *laece* is further indicated by the subsequent conversion of *hospitium*, a house for travellers, into Hospital, a house for the sick. The verb *lacnian*, to foment, to heal, (fomentare, curare, sanare,) expresses one of the common modes of treatment. The *laece* was one of the clergy, devoted, probably, in many instances to the service of the higher church dignitaries, and of the nobles. The Bishop John, previously referred to, retiring into a remote part of the country, met with a dumb boy, (*mutum et scabiosum.*) John made a sign of the cross, and commanded the boy to put out his tongue, and say, *yea*, *a*, *b*, &c. This he did; and the bishop, not a little pleased at his success, ordered his doctor (medicus) to cure the scurfy head.† The leech did as he was commanded, and the youth's countenance became smooth, his words prompt; the hair of his head curled beautifully.‡ Alfred, after celebrating his nuptials by long feasting, day and night, among his people, was seized with sudden and intense pain, not understood by any of the physicians—*Omnibus medicis incognitus*. *Asser.*

After a careful study of the medical wisdom of our ancestors, the conclusion is inevitable, that they possessed no efficient means of combating disease—their medicine was like a charm sung over the bleeding warrior. Nor were they acquainted with the elementary laws of Hygiology. What then, it is inquired, was the state of public health? It will be recollected, that the Saxons lived in a constant state of predatory warfare by sea and land; the conquest of Britain, from the time Hengist landed in Kent, till Ida reached Bernicia, occupied a century (A.D. 449—549); and this long, exterminating British war no sooner ceased, in 560, when the Octarchy was founded, than the conquerors themselves renewed the strife. Augustin and the Roman missionaries landed in England, A. D. 597, and the Saxons became Christians: but when the mantle of peace had descended on their turbulent spirits, the Northmen invaded and vexed the country thirty two years, until the genius of Alfred triumphed, and Hastings was finally expelled, A. D. 897. The kingdom was consolidated under Athelstan (934): the Danes, nevertheless, invaded England in 980, and Canute was chosen King in 1016. Edward the Confessor restored the Saxon line in 1042. From the enumeration in the Domesday Book, it has been estimated that the population at the period of the Norman conquest amounted to 1,500,000, according to some; 2,000,000, according to others. But the slightest examination shows the data upon which the calculations are founded to be inadequate. It is yet certain that there were no large cities: the population was scattered thinly over the country, then densely wooded, marshy, undrained, partially tilled: small towns, castles, and monasteries relieved the wild scenery. Grain was cultivated, but the swineherds and shepherds formed a considerable portion of the pastoral, rather than agricultural Saxons. Bread and beer were made; but fish, particularly eels, and flesh, especially pork, fed on acorns, were the popular food. The meat was killed and salted at the beginning of winter, to save fodder. Three-fourths of the population, at the Conquest, were slaves; they were generally attached to the soil, were the property of the master, and were sold, presented, disposed of by will, like horses, pigs, and oxen. English slaves were at one time an article of export. Life and limb were estimated at a pecuniary value in the Anglo-Saxon jurisprudence; and the slave's life lay low in the scale.

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* Bede Hist. l. 5, c. 3.

† The passage is translated by Alfred:—And bebead his *laece* he sceolde eac swelce *haelan* and *lacnian* tha hreofe his heafdes, and he swa dyde.

‡ Bede, l. 5, c. 2.

In the midst of such a state of society, such an imperfect cultivation of the soil, and intestine wars, it is not likely that capital, or the stock of provisions, would accumulate. Frequently, in the words of the Saxon chroniclers, Famine scoured the hills. Several great famines are recorded in the chronicles during this period; and pestilence followed in the train. Murrains were frequent. Fever and dysentery were epidemical. Besides the epidemics generated by bad crops, murrains, famine, and war, the plague generated in the thronged cities of the East, devastated England. Fordun cites a Greek historian to the effect, that a dire mortality prevailed in 669 all over Europe, and did not spare the remotest islands, namely, Great Britain and Ireland.* In 664, a sudden pestilence, (man-cyealm,) after depopulating the southern coasts of Britain, seized the province of the Northumbrians, and raging for a long time in every direction, destroyed great multitudes.† This was, probably, the buboe plague, which became epidemic at Constantinople, in the reign of Justinian, A.D. 531; and, in the course of the sixth century, destroyed, according to Procopius, half the population of the Eastern empire. It reached Italy, A.D. 565, and spread through the circumjacent countries. In the chroniclers of the age, we have met with notices of fatal famines and pestilences, A.D. 664, 669, 678, 759, 897, 961, 975, 976, 987, 1004, 1005, 1042, 1047. Hecker maintains that the small-pox reached France in the year 580, and cites some remarkable passages in proof of this, from Gregory of Tours.‡ The disease was called *Morbus dysentericus cum pusulis;*

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* J. Fordun, Scriptores XV., vol. iii., p. 646.

† Bede Hist. Eccles. Ang., ad Saxon Chronicle, a. 660.

‡ Geschichte der Medizin.

and it is not unlikely that small-pox formed more than one of the epidemics in England.* It is recorded that Elfrida, Alfred's daughter, had variola.

No data exist for determining the mean duration of Saxon life. But the duration of the kings' reigns throws some light upon the question. Thirty-four reigns occur in England between William the Conqueror and William the Fourth; the mean age at accession was thirty years, at death fifty-two and a quarter, and the mean duration of the reigns was twenty-two and a half years. During nearly the same period, (1060—1823,) thirty-one monarchs reigned, on an average, twenty-four years in France. Sharon Turner gives lists of the reigns in the kingdoms of Kent, Wessex, Bernicia, (Northumbria,) and Mercia,† from which it appears, that the mean duration of eighty-three reigns, between A.D. 449 and 836, was fourteen years: from Egbert to Harold II., (800—1065,) twenty kings reigned, on an average, thirteen years! The abbreviation of the reign implied, in many instances, an abbreviation of life; and the violence which proved fatal to the king and did not spare the thane, fell with tenfold rigour on the churl.

CHAPTER II.

A.D. 1066—1400.

Medical Schools of the Arabs—College of Salernum—Reading—English Writers—Roger Bacon—Number of Physicians—their riches—Chaucer's Doctour of Phisike—Nobles and Ladies skilled in Surgery—L'Abbesse qui fut grosse—Midwives—A Prioress who let blood—Romantic Surgery ridiculed—Hospitals—Lazar-Houses—Lepers—Stews—Hygienic knowledge—Cities—Crusades—Important political events—Improvement of the common people—a description of their still depressed condition—Epidemics—Dawn of brighter days.

In the eighth century, the Saracens founded, at Bagdad, an academy, a medical college, public dispensaries, and hospitals, for the cultivation of Clinical Medicine. Students flocked to this city from all parts of the world; and, at one time, it is said to have contained 6000 *savans.* Wherever the Arab conquerors wandered, the Caliphs displayed the same zeal, and the same munificent patronage of the sciences; which, however, seem to have found in Spain their peculiar and genial home. From the eighth to the thirteenth century, the Christians of the West resorted to the academy of Cordova, to listen to its teachers, and to expatiate in its extensive library.‡ The Normans, by their conquests on the shores of the Mediterranean, brought the men of the North into more immediate contact with the Arabs on one hand, and the ancient learning, still lingering in the monasteries of Italy on the other; while their ardour and genius gave a new impulse to the sciences. In the twelfth century, the medical school of Salernum acquired, under their auspices, a splendour which was reflected over all western Europe. The metropolitan school of Paris was made a University, every department of science was taught in its precincts, and it is said the students exceeded the inhabitants in number. Montpellier grew into celebrity; Bologna, and other Italian schools, soon merited this honourable appellation; and in England, Oxford and Cambridge gained a great accession of strength and importance, by migrations from the school of Paris (1229.)* Nothing very definite has been discovered relative to the medical studies of the English universities in this period, but the courses of medicine in all the schools seem to have been established upon nearly the same basis as those of Salernum.† The candidate for the degree of Master had to prove that he was legitimate, that he was twenty-one years of age, and that he had devoted seven years to the study of medicine: to swear fidelity to the society, to take no fees from the poor, and to have no share of gains with apothecaries.† He was examined in the *Articella* of Galen, the first book of Avicenna, and a passage from the aphorisms of Hippocrates. If examined in the analytic books of Aristotle, he assumed the title of *Magister Artium et Physices*. *Doctor*, as the etymology implies, almost always designated a public professor.

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* There is a charm against the Small Pox, (With Poccas,) in the Cotton MSS. Caligula, A. 15, vi, fol. 125.

† Hist. of the Anglo-Saxons.

‡ Wood's Antiq. Ox., lib. i., p. 56.

In Paris the Professors of Medicine were ranked among the *Artists*. After three years' study, students were allowed to teach the preparatory sciences, and entitled *baccalaurei;* but before being permitted to lecture publicly or practise, six years' study and severe preliminary examinations were enjoined. In the early part of this period medicine was taught in the monastic schools, and even later it was superficially studied as a branch of philosophy. Except in some rare instances, the scholastic lecturer, or *the reader*, required no subjects for anatomical demonstration; (a pig was occasionally cut up in the schools;) he needed no medicines, no patients, to exemplify his teaching. The senses were little exercised, and appeal was rarely made to personal experience. In compensation the memory was liberally called upon; and the judgment was practised, if not perplexed, by logical distinctions. The English writers of the age are Richardus Anglicus, 1230; Nicolas de Ferneham, 1241; John Giles, or De Sancto Aegidio, about 1200-1300; Hugh, of Evesham, 1287; Gilbertus Anglicus, John of Gaddesden, William Grisaunt, 1350; John Ardern, 1370.‡ The *Compendium Medicinae* of the English Gilbert, written early in the 13th century, the *Lily of Medicine* (*Lilium Medicinæ*) by Gordon, and the *Rosa Anglica* of John Gaddesden, Professor of Medicine, Merton College, Oxford, in the 14th century, stand forward among the most celebrated productions of the age, and represent all its subleties and coarseness, some of its discoveries, and a plentiful share of its absurdities. Leprosy is described, and small pox, and gonorrhoea: there are traces of original observation, and acute reasoning.* If these early productions of the English are compared with the Saxon superstitions, simplicity, and faltering ignorance, they afford evidence of progress and dawning light; if we pass at once to their lucubrations from the pure regions of Grecian intellect, or from the science of the present century, the middle ages will appear dark, and merit the contempt with which they have been viewed by some historians.

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* See an invitation addressed by Henry III., *Magistris et Scolaribus Paris*, in Rymer, A.D. 1229. A thousand students, some say thousands, came at this invitation, and settled in England.

† Sprengel's Hist. of Medicine. Freind's Hist. of Physic, vol. i., p. 230.

‡ Aikin's Biographical Memoirs of Medicine.

The great Roger Bacon, by his mechanical inventions, and experimental investigations, laid the foundation of modern philosophy, in the 13th century; and never did a human spirit burn more zealously to promote the happiness and health of mankind by the application of the results, methods, and instruments of natural science to medicine. His ardour led him to expect and seek the secret of imperishable existence.

The means of medical instruction furnished a considerable body of practitioners, as the *physici* are often mentioned by the monks, and referred to in the public records. Bacon, speaking of the means of prolonging life, and attaining immortality, ascribed the constant failures to the neglect of a sanitary regimen in youth; adding, "of a *thousand* physicians, (de millenaria medicorum,) scarcely will one be found who cares for these things."† Oxford contained 30,000 students; many of whom, no doubt, became Doctors of Physic, as Antony Wood relates that Doctors of Divinity, Law, and Physic, were in greater repute among men than Doctors in Arts; according to the trite verse:—

Dat Galenus opes, dat Justinianus honores
Sed Genus et Species cogitur ire pedes.

The supply of Doctors in Physic, was, however, rather under than over the demand; as this verse tends to prove. A nation always estimates its health, and the utility of medical advice, at a certain value: if the number of medical men is too numerous, the fees and services suffer depreciation; if a greater quantity of skilful attendance is required than the existing practitioners can supply, the public are placed at the mercy of the actual professors. In urgent sickness, and in such dreadful epidemics as the black death, the Doctors in Physic could only attend a part of the sufferers; they chose to attend those who paid them the highest fees, and thus called down upon themselves the phials of indignation which have since been poured upon the corn-merchants. Contemporary writers agree in accusing the physicians of the 14th century of avarice; and this implies that their numbers were inadequate.

Some nobles and princes had physicians and surgeons in their households; thus when the mob, led by Wat Tyler, set fire to the Savoy, a friar, "Maister in Medicin, pertaining to the Duke of Lancaster, was slain in despite of his master."* That physicians were sent for to great distances, and sometimes in vain, is evident from several of the popular romances. In the Doctor of Bray—the *Vilain Mire*, which became in the hands of Molière *Le Medicin Malgré-lui*—the King's Daughter, the Damoiselle Ade is sick, and messengers are sent to seek a doctor; nor are they to give up should the quest lead them to England, (passer devons en Engleterre.) Martine, who had recently experienced proofs of her partner's superiority, tells the messengers that the Vilain is an accomplished leech; that he could only be driven to undertake professional duties by dint of cudgelling; that he knew more of physic, and was a better water doctor than Hippocrates.

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* Dr. Freind has given a spirited analysis of Gaddesden's work in his classical History of Medicine.

† Opus Majus Rog. Bacon, p. 460. Ed. Jebb.

> Certes il set plus de medicine,
> Et de vrais jugemens d'orines,
> Que onques ne fut Ypocras.†

Sir John Froissard, the great chronicler of French and English chivalry, narrates, that in the insanity of Charles VI. of France, the royal dukes, sent, at the suggestion of Seigneur de Concy, to Laon, for William of Harsley, a great physician. De Concy introduced him to the king's uncles, with: "Here is William of Harsley, of whom I have spoken." "He is welcome," replied the two dukes; they received him graciously, gave him good cheer, (très bonne chère,) and then sent him to Creil, to visit the king, and to remain with him till he was in a sound condition. De Harsley's treatment was rational and more successful than the intercessions of all the saints in France, famous for the cure of frenzy; to whom men, made of wax, in the form of the French sovereign, had been very devoutly and humbly offered. The physician first removed the fever and heat, restored taste and appetite, caused the patient to eat, drink, and sleep; and made him conscious of every thing; but he was very, very feeble; and, little by little, to refresh him, and to change the air, the physician made him ride, hunt, and hawk. He performed an excellent cure. "Then it was considered to retain this Maister William, and to give him that he should be content withal, gifts and rewards; for the end at which all physicians aim is to get great salaries, and rewards from the lords, the ladies, and those that they visit. (Car c'est la fin, ou medicins tendent toujours, que d'avoir grans salaires, et profits des seigneurs, et des dames, de ceux, et de celles qu'ils visitent.) Desired to abide about the king, he excused himself; and when the council saw that he would not do otherwise, they gave him leave, and one thousand crowns, retaining him in wages, with four horses whenever he would resort to court. He returned to Laon, and died there a rich man; he left behind him three thousand francs. He was the greatest miser of his time; all his powers were exerted in heaping up florins: in his house he did not expend two Paris sous a day; but would eat and drink in other men's houses, wherever he might get it.‡ The knightly chronicler adds, with this rod all physicians are beaten, (il alloit boire et manger à l'avantage où il pouvoit. De telles verges sont battus tous médicins.[*]) William de Harsley was as fortunate as wise in his generation, if he accumulated a fortune in an age when nobles were robbers, and judges received stolen goods.[†] The Doctor of Physic of the fourteenth century has been sketched by Chaucer; and this narrative would be incomplete, if the lines of that great English artist, reflecting, with a dash of satire, the outward form and inward spirit of Doctor, were omitted:—

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* Froissard.

† Fables et Romans du xii., et du xiii. Siecle par le Grand d'Aussy. Du Vilain Mire, vol. 3.

‡ The early translation of Lord Berners is generally followed in the text, but the beauty and naivete of Froissard's style are not easily imitated.

> With us ther was a Doctour of Phisike;
> In all this world ne was ther non him like
> To speke of phisike and of surgerie:
> For he was grounded in astronomie.
> He kept his patient a ful gret del
> In houses by his magike naturel.
> Wel coude [knew] he fortunen the ascendent
> Of his images for his patient.
> He knew the cause of every maladie,
> Were it of cold, or hete, or moist, or drie,
> And wher engendred, and of what humor,
> He was a veray parfite practisoure.
> The cause yknowe, [known] and of his harm the rote, [root]
> Anon he gave to the sike man his bote,[remedy, prescription]
> Ful redy hadde he his apothecaries
> To send him dragges, and his lettuaries,
> For eche of hem made other for to winne:
> Hir [their] friendship n'as not newe to beginne.
> Wel knew he the old Esculapius,
> And Diascorides, and eke Rufus;
> Serapion, Rasis, and Avicen;
> Averois, Damascene, and Constantin;
> Bernard, and Gatisden, and Gilbertin.
> Of his diete mesurable was he,
> For it was of no superfluitee,
> But of gret nourishing and digestible.
> His studie was but litel on the Bible.
> In sanguin and in perse he clad was alle
> Lined with taffata, and with sendalle, [thin silk]
> And yet he was but esy [saving] of dispence: [expense]
> He kepte that he wan in the pestilence.
> For gold in phisike is a cordial;
> Therefore he loved gold in special.[‡]

Besides regular physicians, who had church livings, many priests, monks, and friars, practised incidentally; and nobles and squires did not hesitate to deal in the healing art, as justices of the peace now practise law empirically. Edward the Confessor studied surgery; and the cures he wrought in England and Normandy were written in a book dedicated to his queen Egitha.[§] At a later period, Sir Thomas Elyot wrote the Castel of Health, 2d ed. 1541. Dr. Bulleyn, who died A. D. 1576, mentions Sir Philip Parris, of Cambridgeshire; Sir William Gascoygne, of Yorkshire; Lady Taylor, of Huntingdonshire; and Lady Darrel, of Kent, among other "good gentlemen and ladies," well seen in physic and serviceable to the poor. Lord Herbert, of Cherbury, in his autobiography, declares, that it became a gentleman to possess some knowledge of medicine—an art which would not only get him much knowledge, but much credit. "I have," he says, "studied this art very much also, and have in case of extremity ministered physic with that success which is strange. * * * I cured a great lady in London of an issue of blood, when all the physicians had given her over, with so easy a medicine, that the lady herself was astonished to find the effect thereof."[*] Mr. Boyle appears to have distributed physic somewhat freely among his neighbours.[†]

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[*] Froissard, b. 4, c. 50.

[†] See Hume, reign of Edward III.

[‡] Prologue to Canterbury Tales.

[§] Clowes, on Lues Venerea. 2d ed. 1585, p. 9. He saw the MS. in the possession of Stow.

In this age of chivalry the ladies sustain the fame of their German mothers, and figure not unfrequently as surgeons in the romances of the 12th and 13th centuries, as well as in the poems of Ariosto, Tasso, Spenser, and later bards. The following passage occurs in *Ywaine* and *Gawin*, written in the reign of Richard II. :—

> Twa *maidens* with him thai laft
> That wele wer *lered* (learned) of *leche-craft.*
> The *lorde's doghteres* both they wore
> That wer left to keep hym thore;
> Thai heled him everilka wound.[‡]

While the maidens exercised their craft at the lord's castle, surgeon were found at Arthur's court; for in another stanza we read:

> When the knightes war brought to rest,
> The king gert cum some of the best
> Surgiens that our were sene
> For to hele them both bidene.[§]

The surgery of the ladies of chivalry was not petty, but sometimes exhibited a bold daring; and the *belle* Nicolette, in the adventure with Aucasin, displayed skill and resources which Sir Astley Cooper might as easily envy as imitate. "They embraced, and kissed, so delicious was their joy. 'Ah! sweet love,' said Aucasin, 'I was severely hurt in the shoulder, but I feel no pain nor grief now that I have you.' She felt his shoulder, and, finding that it was out of its place, pulled it with her white hands so skilfully, that God, who loves true hearts, aiding, it was replaced; then she applied flowers, and fresh herbs, and green leaves with a *pan de sa cemisse*—

> Amor le trova inusitate fasce;

and he was soon cured." [||]

The practice, if it loses in simplicity, gains refinement in the exquisite verse of Tasso. Erminia finds the long sought Tancred, wounded, and apparently dead: the symptoms and treatment are good examples of the romantic surgery.

> Oime! de' lumi gia si dolci e rei,
> Ov' e la fiamma? ov' e il bel raggio ascoso?
> Delle fiorite guance il bel vermiglio
> Ov' e fuggito? ov' e il seren del ciglio?

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[*] Life of Lord Herbert, p. 52—5; ed. 1809.
[†] See his works, *passim.*
[‡] Ancient English Metrical Romances, edited by J. Ritson, p. 115.
[§] Idem, p. 160.
[||] The popular literature of English chivalry was in the dialect of Normandy. This

Ma che? squallido e scuro anco mi piaci.

* * * *

Dalle pallide labbra i freddi baci
Che piu caldi sperai, vo' pur rapire.

Raccogli tu l'anima mia seguace;
Drizzala tu dove la tua sen gio.
Cosi parla gemendo; e si disface
Quasi per gli occhi, e par conversa in rio.
Rivenne quegli a queil'umor vivace,
E le languide labbra alquanto aprio:
Apri le labbra; e con le luci chiuse,
Un suo sospir con que' di lei confuse.

Sente la donna il cavalier che geme,
E forza e pur che si conforti alquanto.
Apri gli occhi, Tancredi, a queste estreme
Esequie, grida, ch'io ti fo col pianto:
Riguarda me che vo' venire insieme
La lunga strada, e vo' morirti accanto:
Riguarda me; non ten fuggir si presto:
L'ultimo don ch' io ti dimando e questo.

Apre Tancredi gli occhi, e poi gli abbassa
Torbidi e gravi: ed ella pur si lagna.
Dice Vafrino a lei: Questi non passa:
Curisi adunque prima, e poi si piagna.
Egli il disarma: ella tremante e lassa,
Porge la mano all'opere compagna.
Mira e tratta le piaghe; e di ferute
Giudice esperta, spera indi salute.

Vede che 'l mal dalla stanchezza nasce,
E dagli umori in troppa copia sparti;
Ma non ha, fuorch' un *velo*, onde gli fasce
Le sue ferite, in si solinghe parti.
Amor le trova inusitate fasce,
E di pieta le insegna insolite arti:
L'asciugo con *le chiome*; e rilegolle
Pur con le chiome che troncar si velle;

Pero che 'l velo suo bastar non puote,
Breve e sottile, alle si spesse piaghe.
Dittamo e croco non avea, ma note
Per uso tal sapea potenti e maghe.
Gia il mortifero sonno ei da se scote,
Gia puo le luci alzar mobili e vaghe.
Vede il suo servo; e la pietosa donna
Sopra si mira in peregrina gonna.

Again in the celebrated *Morte d'Arthur*, it is said that "the Kyng
(in Ireland) for grete favore made Tramtryst to be put in his *doughter'*

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is a good specimen; the simplicity of the original scarcely admits of translation. I
s'entrebaissent et accolent si fu la joie bele. Ha! douce ami, fait Aucasin, j'esto
ore moult blecies en m'espaulle, et or ne sent ne mal ne dolor, pui que je vous ai
Ele le portasta et trova qu'il avoit l'espaulle hors de liu. Ele le mania tant a ses
blances mains, et porsaca si com Dix le vaut, qui les amans aime, qu'ele revint a liu
et puis si prist des flors et de l'erbe fresce, et des fuelles verdes, si le loia sus au pa
de sa cemisse, et il fut tox garis.—*Fabliaux et Contes du* xii *et du* xiii *siecle.—Pa*
Le Grand D'Aussy, ed. 1829.

ward and keepyng, by cause *she was a noble surgeon.* And when she had searched hym she fond in the bottome of his wound that therein was poyson, and so she heled him within a whyle, and therefor Tramtryst cast grete love to *La beale Isonde*, for she was at that tyme the fairest mayde and lady of the worlde."† The experience of chivalry proved that the occupation was, in no slight degree, hazardous; as the fees were not always paid in gold. In another case, the knight Sir Tristram had been sorely wounded with a spear poisoned: The king sent "after alle menere of leches and surgens, both unto men and women, and there was none that wold behote hym the lyf." A wise lady at last came, and told King Mark, Sir Tristram, and all his barons, that the knight would never be whole till he visited the country whence the venom came, when he should be healed, or else never.‡

The story of "the Abbess who was with child," (*L'Abbesse qui fut grosse*,§) implies that a jury of matrons was not unknown in this age. The unhappy young abbess was no sooner suspected than an archdeacon and five ladies, who knew *privetez de femmes*, examined her up and down, but detected no vice either in abdomen or breast, more than in a pure virgin.

Mais onqes vice n'i troverent
Ne en ventre, ne en mamele
Ne qu'en une simple pueele.

The Saxon *Midwife* (derived by Skinner and Junius from *mid*, reward, and wif, as, says Skinner, she was worthiest of reward‖) resorted to the prevalent practices of superstition; for Piers, the ploughman, ridicules in his crede the "Miracles of Mydwyves," who make the women imagine "that the lace of our lady smok lighteth hem of children."

When the Normans conquered England the nobles, bishops, and abbots were dispossessed of their heritage; and the more ardent Saxons, relentlessly persecuted, retreated from the low, open country into the forests and uplands. "No Englishman," Walsingham observes, "is at this day either duke, or bishop, or abbot. The new comers every where eat up the riches and bowels of England."¶ Educated prioresses and abbesses were introduced from abroad, and practised the charities and arts of their orders among the surrounding population. But they never neglected the interests of their race; and the prioress of Kyrkesley avenged at once the Normans and the Church by treacherously letting Robin Hood, the idol of the Saxons, bleed to death under her hands. This is the legend. Robin Hood had dwelled "in green wood, twenty years and three," shooting the dun deer—despoiling bishops, abbots, and rich nobles—to feed the Saxon poor.

For all drede of Edward our kynge
Again wolde he not goo,
Yet he was begyled, I wys

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† Morte d'Arthur, ed. 1817 by Southey, p. 259.
‡ B. 8. c. 8. p. 257.
§ Fabliaux du xii et du xiii siecle.
‖ Skinner derives Leech in like manner from *Lac*, munus, donum.
¶ This is ably developed by Thierry in L'Histoire de la Conquete d'Angleterre par les Normans.

Through a wicked woman,
The proyoresse of Kyrkesley
That nye was of his kynne.

He again visited the haunts of his youth in merry Sherwood.

When he came to greene wode
  In a merry morninge,
There he herde the notes small
  Of byrds mery syngynge.
It is farre gone, sayd Robyn,
  That I was last here.

With Sir Roger, of Doncaster, "her owne speciall," the Prioress of Kyrkesley had taken counsell how to destroy him. Robyn, distempered with cold and age, had pains in his limbs, to relieve which he resorted to the prioress, some say, his aunt, "a woman very skilful in physike and surgery."

Than bespake good Robyn
  In place where as he stode,—
To-morrow I muste to Kyrkesley
  Craftely to be leten blode.

The treacherous woman bled him—to death.*

Surgery was a part of female education in the days of Queen Elizabeth;† and down to a late period the recipes of cookery and physic were consulted by the provident housewife in the same volume. As physic and surgery became scientific, the feminine professors, no longer keeping pace with the other sex, lost ground; and their services became of very questionable utility, when more skilful advice was attainable. The wits did not hesitate in an age when the Homeric minstrel had sunk into a street ballad singer, and when the ancient Romans walked the boards of the Italian Opera‡ to cover the "noble surgeons" of chivalry with ridicule.

Ben Jonson, in the 17th century, introduces the benevolent Lady Politicke-would-be in the "Fox"—profuse of prescription and advice.

  Lady Politicke-would-be. Alas, good soul! the passion of the heart,
Seed-pearl, were good now, boil'd with syrup of apples,
Tincture of gold, and coral, citron-pills,
Your elicampane root, myrobolanes——
  Volpone. Ah me, I have ta'en a grasshopper by the wing. (*Aside.*)
  Lady P. Burnt silk and amber: you have muscadel
Good in the house —
  Volp. You will not drink and part?
  L. P. No, fear not that. I doubt we shall not get
Some English saffron, half a dram would serve;
Your sixteen cloves, a little musk, dried mint,
Burgloss and barley-meal——
  Volp. She's in again;
Before I feigned diseases, now I have one. (*Aside.*)
  L. P. And these applied with a right scarlet cloth.
  Volp. Another flood of words! a very torrent! (*Aside.*)
  L. P. Shall I, Sir, make you a poultice?
  Volp. No, no, no.
  Lady. I have a little studied physic.

So ended romantic surgery.

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* A Lytell Geste of Robyn Hode, ed. J. Ritson, Esq.
† Harrison in the introduction to Holinshed's Chronicle.
‡ Where are the ancient Romans? At the Italian Opera.—*Bolingbroke.*

Religious houses, monasteries, and cathedrals sprang up in England in the train of Christianity. The largest monasteries were founded prior to the Conquest. They generally possessed a separate sick ward, and an officer, designated *Infirmarius*, who had charge of the sick. The celebrated Lanfranc, Archbishop of Canterbury, A.D. 1070, in the *Decreta pro Ord. S. Benedict.*, directs this officer to keep a separate kitchen, and to make arrangements for supplying the sick brothers with all necessaries, to sprinkle them with holy water, to make them rise, and to wash the bodies of the dying. To the cloister prior was especially consigned the charge of visiting sick brothers, ascertaining their wants, and advising all things necessary, as well for the body as for the soul. No direct reference is made to medicine, although the decrees enter into the minutest details of monastic affairs. The brethren indeed were bled at certain seasons, and there are chapters *De Sanguinis minutione*, as well as *De rasura Fratrum*.[*] The almsgiver was enjoined to inquire diligently where the sick and infirm lay, who could not support themselves; in visiting, to take with him two servants, and on entering a house, to order the women to leave, and then to console the patients kindly, offering the best things in his possession, or what he judged necessary. A great number of *Hospitals* were founded, but, like the alms-houses and *Hospices* of the present time, they were receptacles for the aged, halt, lame, blind, and infirm. The sick were not treated medically, but taken care of within their walls.[†] The merchants of Amalfi, in the seventh century, founded an hospital at Jerusalem, for the reception of the sick: and, prior to the crusades, the congregations of St. Mary and St. Lazarus devoted themselves to the service of sick pilgrims in Palestine. The Templars and the knights of St. John of Jerusalem professed the same object. Gui de Cauliac relates, that where they treated wounds it was by a rude empiricism;—conjurations, potions, oil, wool, and herbs;—grounding their practice upon the text, *Deus posuit virtutem suam in verbis, herbis, et lapidibus*—God gave virtue to words, herbs, and stones. The knights (Machaons of chivalry) ignorant even of the scientific medicine of the age, supplied its place by superstition. Cutaneous diseases were rife, and religious charity raised thousands of lazar-houses for lepers. Matthew Paris computed the number of hospitals in Christendom at 19,000; the city of Norwich alone contained five lazar-houses.[‡] The lazar-house was an asylum; no attempt was made to cure a leper banished from society by the church, and legally dead, although kings visited him with an ostentatious piety. Eadmerus relates that Gundulf founded lazar-houses of wood at Canterbury, and erected a house of stone, handsome and spacious,—*lapideam domum decentem et amplam*—with several small dwellings, and a spacious court. It was the nearest approach to modern hospitals that I have discovered. He divided it into two parts, one for men afflicted with different kinds of infirmity, (variis infirmitatum qualitabus,) another for sick women; he provided the inmates with clothing, daily food, servants, and nurses (custodes) to watch them, and to see that they wanted nothing. He founded a church of regular canons, to administer to them things proper for the salvation of their souls, and sepulture.* So it was ever: the humanity of the age promised infirmity a home, a christian grave, and heaven, when it could not provide healing. If the view previously taken of the scarcity of skilful advice was correct, the existence of institutions, like our hospitals, for the administration of gratuitous medical relief to the mass of the servile population, was a political impossibility.

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[*] B. Lanfranci opera omnia, Paris, 1648.

[†] The first hospitals were founded by the wayside, for travellers, when there were no inns. See *Tanner's Notitia Monastica*. The last edition of Dugdale's Monasticon Anglicanum contains accounts of three or four hundred hospitals, vol. vi. pt. 2.

[‡] Habent Hospitalarii novem decem millia maneriorum in Christianitate, *Matt. Paris, Hist. Ang.* ad an. 1244. Hutchinson Pol. Mag. 1789, Feb. p. 93. See Heister's History of Leprosy in the Middle Ages.

The isolation of lepers was an hygienic regulation adopted from the Mosaic laws. The brothels in England were subjected to public regulation; and inspected, in Southwark, where there were eighteen in number, by the bishop of Winchester. The *Stewholder* was fined 100 shillings if ever the "perilous infirmity of brenning" was acquired in the arms of his harlots—a saner and less disgusting regulation than that adopted at Avignon, and still pursued in France.† The fair, fertile, salubrious sites of monasteries, testify that the clergy were not ignorant of the advantages of certain localities, and accordingly we find Lanfranc censuring an abbot for his inattention to this particular: "The Lord Abbot," he observed to certain nobles, "wastes his time in this wet place, nor will he believe me that he should abandon the building, commence another in a *healthier* situation"‡ (*in saniori loco.*) The towns which now sprang up by the shores and rivers of the island evinced an entire ignorance of the laws of health; the dark, crowded, unpaved, uncleaned streets and dwellings, offered fuel to the pestilence, and the violation of the laws of existence was visited on future generations. The crusades were a succession of fatal experiments upon human life; from 2,000,000 to 7,000,000 of souls were sacrificed upon the altar of certain death, not merely by the enthusiasts Peter and Bernard, but by the wisest warriors of the age, Godfrey of Bouillon, Conrad III., Lewis VII., Frederick I., Richard Cœur de Lion, Philip Augustus, Frederick II., and St. Lewis. Famine and pestilence thinned the ranks of the soldiers of the cross in their marches across Europe; in the cities and on the shores of Asia. Scurvy decimated the fleets.

The order of political events in this period will be suggested by the accession of the Kings: William (the Conqueror), 1066; William II, (the Red), 1087; Henry I, (Beauclerc), 1100; Stephen, 1135; Henry II, (Plantagenet), 1154; Richard I, (Cœur de Lion), 1189; John, (Sansterre), 1199; Henry III, 1216; Edward I, 1272; Edward II, 1307; Edward III, 1327; Richard II, 1377; Henry IV, (Lancaster), 1399. The battle of Hastings decided the fate of England; the destructive contest of the races, and the struggles of the Saxons, were reserved for the reigns of Stephen, of John, Henry III., Edward II., and Richard II. Lewis, at the head of a foreign force, was invited to accept the crown of England in the reign of John, but the arms of her victorious kings, in every other war, gleamed on the enemy's ground. Ireland was conquered by Henry II.; Wales, by Edward I.; and perpetual war was waged with the Scotch and French kings. The ambitious pretensions of Edward III., to the throne of France, were valiantly sustained by the victories of Sluis (1339), Crecy, (1348), and Poictiers, (1357); where the Norman knights and Saxon bowmen vindicated a common origin, and won equal laurels.

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* Eadmerus Hist. Novorum, Lib. 1, p. 9. He was a disciple of Anselm, and wrote about 1121.

† An old statute of 1162, published in the Phil. Transactions, vol. xxx. p. 841.

‡ Lanfranci opera omnia.

William the Conqueror broke down the remains of allodial freedom, and rigorously enforced the feudal system, so much better suited to the purposes of military subjugation. "Castles," says the Saxon Chronicler, "he let men build, and miserably swink the poor."* Three years after the Conquest, 1069-1070, universal famine prevailed, and the wretched inhabitants ate dogs, cats, horses, and human flesh; some, to sustain a miserable life, sold themselves as slaves, while others fell dead on the way to exile.† Henry of Huntingdon laments in his day that "there was scarce any chief of the progeny of the Engles in Engleland, but that all were reduced to slavery and sorrow." Concessions were slowly wrung from the crown by artisans and traders, who obtained protection in towns, and so early as the 13th century, made their voice heard in the national councils. Simon of Montford summoned the Commons. Edward I. conceded that no tax should be laid without Parliament. The cotiers, or cottagers, had greater sufferings than the town-people, and without any compensation, for they had no magistrates of their own caste.‡ But many labourers were emancipated, and destructive epidemics, particularly the plague of 1348-9, diminishing the labouring population, raised the price of wages. A reaper could not be had for less than 8*d.*, a mower for less than 12*d.* a-day, with food. Edward III. decreed, that the labourers (operarii) should demand no more than the usual wages, but the latter, proud and obstinate, (!) regarded not the King's command. Many were cast into prison, many ran into the woods; others, after having been sworn in prison not to take more than their usual wages, were liberated. Artisans in towns were treated in the same manner.§ The royal laws directed against costlier clothing in the poor, also prove that their condition was improving in the 14th century. The aristocracy ascribed the rebellion of 1381, under Richard II, to the "ease and riches of the common people;" but, as the latter were probably the best judges of their own circumstances, it will be well to weigh their own description, happily preserved by Sir John Froissard. Assembled in thousands around their youthful king, they said: "Whereby can they, (the Norman nobles) say or shewe that they be better lords than we, vestured with poor cloth

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* A. D. 1087.
† Simeon Dunelm. Hist. p. 199, Script. Savill.
‡ Thierry, History of the Norman Conquest.
§ Henry de Knyghton, Selden's Scriptores, x. p. 2597-8.

(draps). They have their wines, spices, and good bread; we have rye,[*] and the drawings out of the chaff, and drink water. They dwell in fair houses, and we have the pain and travail, rain and wind in the fields. And by that that cometh of our labour, they keep and maintain their estates. We be called their bondmen, and without we do readily them service, we be beaten. *King.* What will ye? *We will that ye make us free for ever, ourself, our heirs, and our landes; and that we be called no more bond, nor so reputed.* Sirs, said the King, I am well agreed thereto." Half the people dispersed. The frank treachery of Richard was hailed by the courtiers as an auspicious omen. He probably remembered it bitterly at Flint Castle, and when he relinquished the crown in Westminster. It is certain that the people did not forget it, when "white beards," and "boys with women's voices armed," and "beadsmen drew the double-fated yew;" and "distaff-women managed rusty bills" round the standard of Hereford.

In this state, when the people were depressed, and the resources of the country were dried up, or wasted in war, epidemics were frequent and fatal. The chroniclers record famines, murrains, and epidemics, A. D. 1069, 1070, 1073, 1086, 1087, 1093, 1096, 1103, 1111, 1112, 1124, 1125, 1126, 1162, 1175, 1176, 1183, 1189, 1196, 1203, 1221, 1224, 1254, 1257, 1258, 1259, 1271, 1289, 1294, 1295, 1315, 1316, 1318, 1341, 1348, 1349, 1355, 1361, 1362, 1369, 1379, 1390, 1391, 1392. The Black Death, which broke out at Southampton, August 1348, destroyed half the population: according to another estimate, one-tenth part was not left. In a royal edict of December 1st, 1349, it is said, "*non modica pars* populi est defuncta;" in another, of 1350, a stronger expression is used, *magna pars populi est defuncta.*[†] In 1352, hardly a fourth part of the Oxford students had survived the plague.[‡] It spared the great, to fall with redoubled fury on workmen and servants; crowded cities were depopulated. The *Black Death* had many symptoms which characterise plague; the stupor, the sleeplessness, the loss of speech, the black tongue, the unquenchable thirst, and the buboes; putrid inflammation of the lungs, with intense pain in the chest, and bloody expectoration. The gravest symptoms observed in England, were imposthumes all over the body; these were dry and hard, and on being opened discharged scarcely any matter.[§] It proved fatal in two or three days, sometimes in half a day. This epidemic began in the East. It will be a great mistake to suppose that the other visitations recorded were light; I shall give here two or three examples of the desolation that followed in the shadow of the destroying angel. The picture will appear incredible and exaggerated, if it be not borne in mind that the great mass of the people were more wretched than the Irish peasantry,—that the crusaders formed a living chain for the transmission of disease engendered in the East,—that the towns were built by traders in utter ignorance of hygienic principles, and that the poor were unprovided with medical attendance.

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[*] Berners' Trans. 1525, p. 202. The translation does not always agree with the original of Sauvage's edition, 1574: thus Berners omitted rye—seigle.

[†] Rymer's Fœdera, ann. 1348, 1349, 1350.

[‡] Ant. Wood, Antiq. Oxon., ann. 1349-52.

[§] Wood, Antiq. Oxon. See also the authorities in Hecker's History of the Black Death.

A. D. 1196. The common people (vulgus pauperum) perished every where for lack of food; and after famine, the fiercest pestilence followed in the form of an *acute fever*, which destroyed such numbers, that at last scarcely any were left to administer to the sick. The customary funeral ceremonies ceased. In many places, large ditches were dug, in which the dead were thrown.* A. D. 1258. Food failing, innumerable multitudes of poor people died, and their bodies were found lying all about, swollen from hunger, and livid, five or six together, in pig-sties, muddy streets, and dunghills. Those who had homes, dared not harbour the sick and dying, for *fear of infection.* The middle classes sold their possessions, and many of honourable degree were reduced to beg from strangers; or, held back by shame, to pass the nights hungry, pale, and dinnerless in uncounted sighs.† A. D. 1379. In the north, a pestilence destroyed the best men; it emptied the houses of the middle classes, extinguishing entire families; villages and crowded cities were reduced to solitary deserts. In this extremity the Scots fell upon the country.‡

Let us turn from this dark scenery. The softening spirit of chivalry, hallowing truth, and love, and pity—the precepts of Christianity, if not the examples of prelates—the asylums raised for the broken-down wayfarer of life, taught the strong a milder regard for the weak:—the extension of geography and commercial enterprise by the crusades—the establishment of manufactures,—the progress of freedom,—and Chaucer, the morning-star of an English literature, open a brighter prospect.

CHAPTER III.

A.D. 1400—1711.

Physicians a part of the Clergy—their ejection from the rich benefices—consequences to the Church—Medical Hierarchies—Medical education—the English Universities—Lectures in London—Surgeons—Apothecaries—Salaries and Fees—Costume—Medical Science—Pharmacopœia—Corporations—Hospitals—State of Public Health.

Many physicians possessed church livings in the period upon which we are entering; as in the earlier ages they were nearly all ecclesiastics. Neither bachelor nor doctor of physic could marry when the dogma of celibacy was imposed upon the Catholic clergy.* But he could hold rich benefices. The Roman church disliked this arrangement, and when it attained the plenitude of its power, and triumphed over the Emperor and kings, determined that it should exist no longer. *Prelates and archdeacons* were forbid to practise under pain of excommunication in the Synod of Rheims, 1131; in the councils of Monpellier 1162, Tours 1163, Paris 1212, and the Lateran 1139, 1215. This injunction was repeated in severer terms, A.D. 1220, 1247, and 1298; when Rome partly succeeded, by the usurpation of the investiture, in its grand scheme of diverting church property entirely from the purposes of natural science, and lodging it in the hands of mere theologians—more tractable instruments of ambition and superstition than the disciples of Galen. The lower clergy, deacons, sub-deacons, and monks were permitted to practise physic, and to pursue secular studies, but not to shed blood; as the value of their benefices was inconsiderable, the church was indifferent in the matter of their appropriation. Some medical historians deem the papal acts which laid a ban upon ecclesiastical physicians a subject of gratulation. Sprengel imagines that the church adopted this measure to escape the contempt of the cavaliers for physic.† The existence of this contempt is, however, problematical, and the facts admit of a more evident explanation. When the church obtained its immense possessions, the clergy (*clerus*) embodied, like the priesthoods of Egypt and Asia, the learning of the nation; they were the students, professors, repositories, teachers of the Anglo-Saxon cyclopædia of science. The poetry, the history, the natural philosophy, the music, the architecture—all the arts—all the professions were branches of that religious Catholicism. What works and what memorials did Alcuin, Bede, Dunstan, Adhelm, Bacon, the scholastic writers, the body of the clergy, transmit to posterity? Sermons and homilies? Few of these. But innumerable scientific treatises, and the cathedrals, the eternal temples, the realised ideas of a new architecture, the groundwork of a new civilisation. To this clergy the people cheerfully devoted tithes and a liberal share of the public property. As a branch of the learned body (clerus), physicians possessed church property: they were deans, prebends, abbots, bishops; in other words, they discharged the easy duties, and received the revenues of these lucrative offices. When the Pope excommunicated a bishop for practising physic, what was this in reality? Simply depriving a physician of his bishopric. As kings remunerated the state officers and lawyers, so they rewarded physicians by the grant of church livings, and continued to do so notwithstanding the papal decrees. For this, however, a dispensation was generally obtained. The following are examples:—

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* Rerum Ang. Scrip. ab H. Savillo. Chron. of Walter Hemingford, v. 2, p. 546-7.

† Matthew Paris, Historia Anglorum, p. 955.

‡ Walsingham, Anglic. Script. p. 228.

1087. Of the two most skilful physicians of the time who attended

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* Jean Despois, who took the bachelor's degree, A.D. 1395, forfeited the licence of the faculty of Paris by marrying, but was restored on the death of his wife. And *Charles de Meauregard*, dean of the faculty in 1443, was deprived of all his titles; as he, three years afterwards, not only married, but married a widow. This regulation was pronounced *impium et irrationale*, and abolished by Cardinal d'Estouteville, A.D., 1452. *Rech. Historiques sur la faculte de medicine de Paris.* Par J. C. Sabatier, p. 35, 36. An able work, which I regret not having seen earlier.

† Hist. de Med. vol. 2, p. 350.

William the Conqueror in his last illness, Gilbert was Bishop of Lisieux—Goulard, Abbot of Jumiges.

1306. Ed. I. * * dilecto clerico nostro Magistro *Michalao de Tyngwyck* medico nostro praesantavimus ad ecclesiam de *Recolure.* * * Gratiam velitis facere specialiter quod idem *M. Nichol* dictam ecclesiam *de Recolure*, unâ cum ecclesiâ de *Colleshull Sarum* diocesii (quem adeptus fuit ante praesentationem sibi factam de ecclesia Recolure,) &c. * * 11 September.* The Pope granted the dispensation here required.

1307. The queen presented Johannes de Fontibus, clerk, her physician, to the prebendary of Rothomagen.*

John of Gaddesden was prebend of St. Paul's, in the stall of Ealdland.†

1422. Henry VI. Pierre d'Alcobasse prays the Duke of Gloucester, the king's uncle, to grant his *humble et foiall oratour, phisician de mesme le Roy*, the prebendary in the free chapel of St. George, at Windsor Castle. *Le Roy la grante.**

1423. Plaise, &c., pur doner et presenter John Swanwych, Maistre d'Art et Bachelier en Phisick à l'eglise de Bradfeld. Le Roy la grante.* See also 22 Henry VI. 1444.

1455. There is a letter in Rymer addressed to the *Dean of Salisbury*—" a proved man in the craft of medicine"—requesting his professional attendance.*

1522. 14 Henry VIII. We grant to our doctor in physic, E. Fynche, the prebendary in the church of St. Stephen's, Westminster, now vacant by the resignation or dismission of Doctor Linacre, 29 Nov.*

1523. *Moscriff*, Wolsey's medical lecturer, was admitted to the reading of the sentences on condition of answering twice in the schools, and preaching four times in St. Mary's Church.‡ Phreas, a distinguished doctor of physic, was created bishop of Bath and Wells by Pope Paul II., in 1465. Linacre and Chambre (d. 1549) were in holy orders, and had several church preferments; Chambre was physician to Henry VIII., and dean of Westminster. W. Turner, (d. 1568) a zealous apostle of the Reformation, and physician to the Protector Somerset, was prebend of York, canon of Windsor, and dean of Wells. W. Baley, licensed to practise physic, 1558, was about the same time made prebend of Wells; he afterwards became physician to Elizabeth §

There is little room for astonishment then, that the bishops, deans, or vicars-general were appointed by the 3 H. VIII. c. 11, ann. 1511, to examine, with doctors of physic and surgeons, all who sought a licence to practise.

The church allowed labour to follow its natural course into sectional departments, but it allowed no division of the property. Poets, musicians, architects, historians, statesmen, physicians, alchemists, botanists, philosophers, all professors of the liberal arts, were gradually dispossessed of the common patrimony under a religious colour. Science was persecuted in its attempts at free inquiry; Bacon was cast into prison, and the Inquisition was founded. The avarice of Rome soon recoiled upon its own head; the learning which the people had endowed in conjunction with their religion was no sooner abandoned, than the Minstrels, and Dante and Chaucer and Petrarch, at the head of the literature of the age, attacked popes, priests, monks, and friars with the keenest weapons of satire. Wicliffe preached, and the Reformation, by a sudden revulsion, tore her hoarded spoils from the arms of the Catholic hierarchy. At the Reformation, much of the property, nominally appropriated in the monasteries to learning, and to general education, was confiscated—the remainder was granted to the theologians almost exclusively; in the next century English episcopacy was temporarily annihilated. So also the Gallican clergy—no longer incorporating the science and art of France—were entirely deprived of the ecclesiastic revenues; and the priests are now paid as professors of science are paid in France—out of the taxes. The same happened in Prussia.

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* Rymer's Fœdera.

† Freind's History of Medicine, vol. 2, p. 291.

‡ A. Wood's Fasti, 1521.

§ Aikin's Biog. Mem.

The expulsion of physicians from the church was less disastrous to medicine. The ultimate separation of this science from theology was inevitable. Let us suppose, that when the secession took place, physicians had carried with them a share of the common property of science, and that a medical hierarchy had been founded, comprising as many orders as were recognized by the Roman law under the emperors;[*] and living on the tithes and public endowments. Would this arrangement have been more advantageous than that which actually took place? Such a constitution would provide the profession with a fixed income, derived, not from the poor, but from the affluent; and the supervision of skilful inspectors would repress abuses: the fabric looks attractive, but, by destroying the direct connexion between labour and remuneration, it would prove unwieldy, inefficient, and unstable in practice. What a door would the medical establishment open to idleness, inaptitude, corrupt patronage, and heart-burnings? In physic, the *voluntary system*, where the patient and physician mutually arrange the terms of attendance, is the best for the public, and, unquestionably the most favourable to science; for an establishment always has its articles of faith; the body gains nothing by innovation; it is a bitter enemy of progress; novices, before they are initiated, swear an eternal faith in its doctrines, and wear that adamantine chain around the intellect which can never be broken asunder.[†] When medicine, no longer slumbering in bishoprics, was cast out, and derived riches and fame from society in proportion to its apparent value, science grew conscious of a new vigour; the wing did not flag; and, unfettered, soared in the wide expanse of nature, till she held communion with the undying light, and found in the buoyant elements her home.

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[*] Five, seven, or ten *Archiatri populares* were appointed in every city; and the *archiatri palatini* placed at the head of the orders, were designated by titles of high rank, *præsul spectabilis*, *comes*, *spectabilis*, and *perfectissimus vir*, *vicarius*, *dux*. The archiatri were paid in goods and in salaries, that they might attend the poor; they possessed immunities from taxes and other privileges; chosen by the citizens, the choice was confirmed by examinations and the emperors. *Cod Theodos*. L. xiii. *Tit*. 3. *Cod. Justin*. L. x. *Geschichte der Heilkunde von J. Hecker*, v. 2. p. 1—19.

[†] Ce n'etait pas en effet avec le doute philosophique que la Faculté accueillait les idées ou les decouvertes nouvelles; *c'etait avec une sorte de fanatisme qu'elle les rejetait de son sanctuaire comme autant d'hérésies sacrileges. Sabatier*, p. 73. Antimony, opium, mercury, bark, the doctrines of Harvey, inoculation, were all denounced by

Medical teaching seems to have gone on languidly in the English universities until Cardinal Wolsey founded a lecture at Oxford, "the chair of which," says Antony Wood, "did hold T. Moscriff, because he was a person of singular ingeny," (1522).* The medical professors read either Hippocrates or Galen at eight o'clock in the morning. Linacre, at his death in 1524, left lands for two physic lectures in Oxford, and one in Cambridge, but nothing was done before the 3rd Edward VI., when eminent persons in the schools read the lectures, which were afterwards settled in Merton College. The readers were bound to expound and read the books of Galen and Hippocrates in the public refectory of that College, to any of the University that would please to be their auditors. Several shaggling lectures were also allowed, The Anatomical lecture was proposed November 17, 1623, and had attached to it a yearly stipend of 25*l.* The Regius professor was appointed reader, and had to pay 2*l.* or 3*l.* to a skilful surgeon or dissector, towards ordering and burying the body. Dr. Clayton delivered the first lecture on the 12th of March, 1624. T. Clayton succeeded his father in 1647; "but never," remarks the historian, "as I have been informed, read a lecture, because he could not endure the sight of a bloody body;" a sort of hereditary qualification for the chair of anatomy, which it would seem descended to several succeeding professors. Of the medical instruction little is known; it was carried on after the ancient method, and apparently with no very brilliant success; but in the 17th century, Cambridge stood higher than Oxford as a physic school. Caius and Harvey, before proceeding to the flourishing schools of Italy, studied at Cambridge; and in this University Glisson (1597—1677) was Regius professor of physic about forty years. When the Czar Michael Feodorowich sent John Elmston, son of his principal interpreter, to study physic and the other sciences in England, Charles I. gave express orders that he should be received at Cambridge (1631). The king adds, in his letter concerning the interpreter's son: "We have also commanded the College of our Doctors of Phisick in this our imperial city of London, to give him free access to all their exercises and lectures."† The imperial city already began to assert its supremacy as a practical, experimental school of medicine. Dr. Caldwell and Lord

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the faculty of Paris, while it retained an ecclesiastical organization. Molière makes the Bachelor of Medicine characteristically *swear*:

Essere in omnibus
Consultationibus,
Ancieni aviso
    Aut bono
Aut mauvaiso.

[*] Hist. and Antiq. of the University of Oxford, by A. Wood.

[†] Richter, Geschichte der Medizin in Russland. Appendix. Elmston returned to Russia in 1642.

Lumley procured her Majesty's leave, under the broad seal, to found a surgery lecture, to be read every Wednesday and Thursday, for ever, *ad usum lectoris artis seu scientiæ Chirurgiæ*, within the College of Physicians, London, in the 24th Elizabeth, A.D. 1684. The foundation was of 40*l.* a-year, laid as a rent-charge (apparently 20*l.* each) upon their estates. The College decided forthwith, that 100*l.* should be taken out of their public stock to build more spacious rooms "for the better celebration of this most solemn lecture."[*] Some zealous searchers into nature, though exposed to horrible suspicions, had no doubt attempted to dissect parts of the human body in England before 1540, but after that year, four bodies were granted annually to the Surgeons' Company, and in 1565, Elizabeth granted the College of Physicians the same number, which was augmented by Charles II., to six. Some explanation of the parts exposed in dissection was given in the colleges; Caius lectured upon anatomy at the Surgeon's Hall, and we find Dr. Read intimating, in the dedication of his work to Charles I., that His Majesty had appointed him to lecture there on the precepts of art every Tuesday, and to conduct the anatomical dissections.[†] In Stow's Annals, it is said, that an anatomical lecture was read upon the body of a sound man, newly executed for felony, by a Doctor of the College of Physicians; but that the times of the lecture were not certain. The annalist had heard Sir W. Padey, knight, read his anatomical lecture upon a corpse at the Hall in Munkwell-street. Harvey was appointed to the Lumley lectureship in 1615, and there delivered the doctrine of the circulation of the blood.[†] Glisson was chosen reader in the College 1639, and acquired great reputation by his lectures *De Morbis Partium.*[§] The genius of Harvey threw lustre over the London anatomical school, which, in the 17th century, gained celebrity in Europe, and attracted foreign students.[||] Sir Charles Scarborough lectured upon the muscles of the human body for sixteen years in the theatre at Surgeons' Hall, and received the applause of the "learned persons about town, who resorted in great numbers to those readings."[¶] The syllabus of Scarborough's lectures was published in 1698: the course of myology comprised six lectures. The summary of another syllabus, which appeared in 1704, I will copy. It is entitled

ΣΥΛΛΑΒΟΣ ΕΝΤΕΡΟΛΟΓΙΑΣ.

Index omnium humani corporis partium internarum externarumque quae secari solent in ista parte anatomiae, in sex praelectionibus distinctus. Lond. 1704.

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[*] Goodall's History of the College of Physicians, and Stow's Annals, cont. by E. Howes, 1631, p. 1078.

[†] The manual of the anatomy of dissection of the body of man, containing the enumeration and description of the parts of the same, which usually are shown in the public anatomical exercises. 5th ed. By A. Read, Doctor of Physick, a *Fellow of the Physicians' College, London*, and a brother of the Worshipful Company of the *Barber Chirurgeons.* 1655.

[‡] Meam sententiam E. D. D. antea sæpius in prælectionibus meis anatomicis aperui novam: sed jam per novem et amplius annos multis ocularibus demonstrationibus in conspectu vestro confirmatum, &c.—*Dedication.*

[§] Aikin, p. 327.

[||] To render it famous all over Europe, and every year to invite foreigners to attend our lectures from beyond the seas.—*Chirurg. Treatises*, by R. Wiseman, 1676.

[¶] Dr. Goodal, Hist. of the Royal College of Physicians, 1684, Epist. Ded.

Lecture 1, treats of the integuments and membranous parts :—L. 2. Of the alimentary canal, liver, spleen, pancreas :—L. 3. Of the *via lactea*, or of the passage of the chyle into the blood, and of the parts in the thorax, of the breasts, and the larger arteries of the whole body :—L. 4, Of the urinary organs, and of the organs of generation in both sexes :—L. 5. Of the five senses, and of certain glands accessory to these organs :—L. 6. Of the brain, cerebellum, and spinal marrow.

Lectures on Surgery were delivered at an early period by Cunningham and Read, and other physicians. Gale refers to Dr. Cunningham's division of tumors, when he read, in 1563, the book of Galen on tumors "to the Chirurgeons of London, in the Hall." * It is stated in Stow's Annals, that early in Elizabeth's reign, the foundation of a College Lecture upon physic was agitated ; but, as the Fellows of the College were expert and well learned in that art, this was deemed unnecessary ; and it was thought more advisable that a lecture of Chirurgery and Anatomy should be read by some one of these doctors, for the instruction of surgeons in and about London, "many of whom had not been bred in schools." † Lectures were also read by the surgeons themselves, as Woodal asserts in 1639, each worthy artist reading in his turn, thus exhibiting his own sufficiency, and edifying the younger practitioners.‡ Theodore Gulston, who died in 1632, left 200*l.* for the maintenance of an annual Pathological Lecture within the College of Physicians ; a dead body was to be procured, and two or more diseases discussed on the mornings and afternoons of three successive days, by one of the four youngest doctors. Of the services of the Gresham professors little can be said: Dr. Gwinne, the first physic professor, was chosen in 1596.§

As the plagues of the 14th century gave an impulse to the study of internal diseases, so the wars of the 15th and 16th centuries breathed new life into *Surgery*. The Saxons had their *blood-laetere ;* and from the time of the Arabs, and the Crusades, surgeons are distinguished in the chronicles of the monks, and the songs of the minstrels. Rhazes (d. 923) would not allow the surgeon to operate upon him for cataract, because the artist could not inform him how many membranes the eye contained. Robert, the son of William the Conqueror, had a wound in the arm, which was badly treated by the surgeons in Palestine.‖ The death of Richard Cœur de Lion is ascribed to unskilful surgeons. Frederick made certain regulations in reference to the surgeons in the faculty of Salernum, (A.D. 1140.¶) English surgeons acquired a relative celebrity in the 14th century; for we read in Froissard that Robert d'Artois was advised to return to England where he would find better surgons and physicians, (*Cirurgiens et Medecins.*)[*] John Ardern, surgeon, was at the battle of Crecy; he left several MSS. on medicine and surgery;[†] his surgical works, particularly that on *Fistula in Ano*, translated by John Read, in 1588, contains several original observations. He had considerable practice in the fistula line; and had very shrewd ideas of a bargain, insisting that you should get as much as possible for the cure, and good security for the payment.[‡] A common precaution in the age. When Henry V., in 1415, was about to invade France, he engaged, by indenture, the attendance of *Thomas Morstede*, having in his company three archers, and twelve men of his profession, (*Hommes de son Mistier;*)[§] as security for the payment of the second quarter, the king gave him in pledge certain jewels, which Thomas deemed equivalent in value to the salaries. Surgeons were then liable to impressment, and made some of their own instruments;[‖] for in 1416 the king commands T. Morstede, and W. Bredewerdyn, *Sururgicis nostris*, to take as many surgeons and other artisans (alios artifices) as were necessary to make the instruments required in the voyage.[¶] The surgeon was to be paid as an esquire, forty marcs the year, if the king went to the Duchy of Guienne; the *homme de son Mistier* twenty marcs, and the archer ten marcs per annum. Besides this, Thomas anticipated booty, of which he engaged to give the king a third. A physician was also allowed forty marcs; a sum equal to about £267 of our present money.[**] Henry VI. (1430) had, on the advice of his counsel, four surgeons (sirurgiens) resident in his "hotel," engaged at sixpence a day; £20 were allowed for medicines, instruments, stuffs, (estuffes,) and other surgical necessaries.[††] In the campaign of Henry V. Morstede was to have twelve-pence a day, and his fifteen followers sixpence a day, if the king entered the kingdom of France.

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* Instit. of a Chirurg. by T. Gale, 1583.

† Stow's Annals, ed. 1631, p. 1078.

‡ Woodal, Fragments concerning Surgery, p. 233. Works, ed. 1639. Woodal, as he could not deny, had read lectures there in his turn and place ; yet his ambition was only to declare himself to the world to be Chirurgeon's mate, as aspiring to soar no higher, (ne sutor ultra crepidam.)

§ Ward's Lives of the Gresham Professors.

‖ Matt. Paris, Hist. Ang. A.D. 1100.

¶ Lindenb. cod. legg. ant.

Medical science is indivisible; the science of the human organization in all its states is but one science; it must be studied and comprehended as a whole, or not at all. But medical art, the science applied in practice, like all other labour, necessarily tends to subdivision in the progress of civilisation, and this is found by experience to be advantageous. The first division in practical pathology was into diseases requiring mechanical appliances, and diseases in which internal remedies alone are employed. The church confirmed the separation of surgery in Christendom by enjoining ecclesiastics not to deal in manual bloody operations; and at the same time made it a mere mechanical art, by cutting off its connexion with physic and the sciences. Among the various uneducated classes accustomed to use edged tools, who practised surgery, the barbers were distinguished at an early period. The first charter was granted, in the 1st Edward IV., to the freemen of the mystery of barbers (Misterae Barbitonsorum) of the City of London, practising surgery (*facultate sirurgicorum*) in wounds, lesions, and other infirmities; in letting blood and drawing teeth. The alleged grounds on which the charter was granted were the ignorance, and negligence of the freemen themselves, and of other foreign surgeons (*sirurgicorum forinsecorum*) not free of the city, daily flowing into London.* It is evident from this charter that in 1461 surgeons existed in London; and this is confirmed by the 32 Henry VIII., c. 42, A.D. 1540, where two distinct companies of surgeons are mentioned; the one called the Barbers of London, the other the Surgeons of London; the barbers incorporated, the surgeons without any manner of corporation. The relative position of the barbers and surgeons in London is somewhat obscure; it is illustrated by the state of things in France. Several surgeons in Paris, with Jean Pitard, surgeon to St. Louis, at their head, separated from the faculty of medicine in 1271, and formed a distinct college; the members were allowed to marry, enjoyed the same privileges as masters of physic, and wearing the same long robes, were called *chirurgeons de robe longue;* or, to distinguish them from the barbers, *chirurgiens lettrés*. They studied medicine two years, and underwent strict examinations. The Faculty of Medicine discountenanced the surgeons, and in 1505, to encourage the barbers, undertook to provide them with lectures in the French tongue.† The barbers, supported by the faculty, were constantly embroiled with the surgeons; and the latter at last wearied with the strife, sacrificed themselves to the supremacy of the doctors of physic; *chirurgiens jurés* were incorporated with the *chirurgiens-barbiers*, and sank at once into insignificant rivals of the umbrageous faculty. William of Salicet, Lanfranc of Milan, Gui de Cauliac, raised surgeons to a higher rank, and better educated men than the barbers became indispensable; but these elevated surgeons attended the middle classes in sickness, and aspired higher. In England the same course seems to have been taken; the barbers, evidently supported by high authorities, attempted to suppress educated surgeons; they then tempted them into a degrading connexion, by the offer of common privileges and funds, and lands, and tenements.

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[*] A.D. 1343, Ed. 1559, vol. i., p. 112.

[†] In the British Museum.

[‡] *Centum* Marcas (a nobili) vel 40 libras cum Robis et Feodis—et 100 solidos (shillings) per annum, ad terminum vitae. Freind's Hist. of *Med.* v. 2, p. 331.

[§] Our word mystery is from the French *Metier*—trade—in the phrase "art and mystery."

[‖] Rym. Foed. an. 1415. 3 Hen. V.

[¶] Rymer Foed. an. 1416, 14 June. 4 Hen. V. Morstede left behind him a work on surgery. T. Tunstal, surgeon, was engaged in the same manner, at two sous a day.

[**] Rymer's Foedera, v. 4, pp. 116, 117, &c. Forty marcs, of 13*s.* 4*d.* each, were equivalent by weight to £52 of our present silver. A bushel of wheat sold for 5*s.* 4*d.*

[††] March 1st, 1430. Rym. Foed.

Down to the 16th century, the education of English surgeons was entirely practical. Many resorted to the London surgeons, "men of great experience, as well in speculation as in practice," and, "by their diligent information, became expert, so as to exercise this science in divers other parts of the realm to the great relief of much people."‡ Gale (1507—1586) states, that in the time of Henry VIII., he had helped to furnish out of London, in *one year*, 72 English surgeons, who served by sea and land, and were good workmen. "At the present day, (1566,)" he adds, "there are not 34 of the whole company of Englishmen, and the greater part of them are in noblemen's service, so that, if we should have need, I do not know where to find twelve sufficient men."* The 32 Hen. VIII., cap. 42, provided that any subject, not a barber or surgeon, might keep a barber or surgeon in the house as his servant, who could practise at home or abroad by his master's licence. The *servants* do not appear to have received any preliminary education. In the *Institution of a Chirurgeon*, by Gale, (1563,) one of the Interlocutors, "marvels at Chirurgeons, by profession, knowing themselves voyde of a number of the points; that of love of their country and conscience' sake, they will not yet, at the least, choose such servants as had some of the forenamed virtues," (enumerated in Hippocrates de Medico). *John Field* replies, "Their answere is, when the sky fall we shall have larkes. They think that they should not have servants to serve in that vocation. For few (say they) that have well brought up their sonne, will put him to the arte, because it is so beggarly and poor." They knew little Latin, and were not deeply versed in literature. The four surgeons of St. Bartholomew's Hospital on republishing (1633) a Treatise for Englishmen, containing the Anatomy of Man's body, candidly confess, that "they did lack the profound knowledge and sugred eloquence of the Greek tongues." Yet they reverenced Hippocrates and Galen, "the two golden fountains and well-springs of Phisick and Chirurgery;"† while they asserted their independence, and saw in "reason and experience, the two principal roots of physic."‡ They asserted the dignity and utility of surgery. "It is not so base as it is taken for," says Gale; "it is of great antiquity, being the most ancient part of physic; and it was exercised by emperors, kings, philosophers, and physicians. In the beginning, physicians and surgeons were both one, and one man exercised both, for so did the princes of physic, Hippocrates and Galen." Ferris, Gale, and Cunningham, struggled to improve their unskilful brethren, and always expressed generous sentiments. I was "stirred to publish" these "simple labours," one of them exclaims, "first to discharge my talent toward God, and duty to my native country; and secondly, to help my brethren." Surgeons were exhorted to follow the precept of Guido: "Be merciful towards the poor, and not too greedy of money."§ Cunningham, a doctor in physic, who devoted himself generously to the promotion of surgical education, stimulated the veteran Gale, in the touching words,—"I bid you well to fare, and remember your white hairs are messengers to admonish you that you must leave this world, and repair to the heavenly chirurgeon, Christ; and therefore haste you for the time that remaineth, and finish the works which you have in your hands. Again, farewell, and love you, Cunningham, as you have begun."

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* Charter 1 Edward 4.

† Sabatier, Hist. de la Faculté, pp. 38, 39.

‡ 32 Hen. VIII., c. 42.

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* The Office of a Chirurgeon. † Clowes.

‡ Vicary's Treatise on Anatomy, 1548. Ded. to the ed. of 1633.

§ Gale. But Clowes makes an important addition to the precept:—"Not too covetous of money, but a reasonable demander. Being good unto the poore, let the rich pay therefore." *Precepts meete for young Chirurgeons.*

Surgeons were appointed to the vessels of the British navy, and also to merchant ships, and the vessels of adventurous voyagers. In Sir Martin Forbisher's second voyage for the discovery of a north-west passage, (1576,) the admiral met with what he was pleased to name, "a man of Cathay, or new land India," whom he attempted to carry to England. The unfortunate individual died, and Forbisher paid Mr. Crowe, the surgeon, for opening the "Indiaman, and balmying him dead, £5;" for household charge, to "the potticarye in his sicknes, and folk hired to tend him and wind him, £1 10*s.* 6*d.*;" for a coffin, 11*s.* 4*d.*; for wax to make his mold in picture, 10*s.*; for a great picture of the strange man in his garments, £5.[*] Woodal was made surgeon-general of the East India Company, and published "the Surgeon's Mate," for the benefit of the young surgeons engaged in the Company's affairs. The charter of 5 Charles I., (1630,) gave the surgeons' company power to take as many barbers and surgeons, in any part of England, as were required for his Majesty's fleet; also, to seize such plaisters, instruments, and medicines, as should be necessary for his service, on paying their value. The supervision of the medicine chests in the merchants', as well as the king's service, was committed to their charge; every article was to be submitted to the Examiners at the Common Hall, or at some convenient place fixed by the Masters. The Masters and Governors appear to have provided the medicines, physical and chirurgical, besides passing the surgeons for the king's service. The Barber-Surgeons' Company was commanded, in 1626, to provide sixteen of the best surgeons for his Majesty's service by land. Charles I. increased the pay of surgeons in the sea service from 19*s.* 4*d.* per month to 30*s.*, and a free benevolence, never given before, towards furnishing their chests with drugs and medicines: his own ships paid £10, and when serving his Highness, merchant ships paid £5, Newcastle colliers £3. All the surgeons had, as formerly, 2*d.* per month of each man. In the land service, the pay of the surgeon major of the whole camp was 5*s.* a day; of his two mates, or servants, 4*d.* a day; of each surgeon, 2*s.* 6*d.*; and to each surgeon appointed to 250 men, a surgery chest of £17 value; to the surgeon major, a chest of £48 value.[†] In 1659, the surgeon's pay was 4*s.* a-day; besides ½*d.* a-week from each soldier as medicine-money. The mate had 2*s.* 6*d.* a-day.

The fear inspired by syphilis; the foundation of the two London Hospitals; the legal grant of bodies for dissection, in 1540; the lectures, and the publication of medical works in English—all contributed more or less to the progress of the surgical class of practitioners.

When indigenous herbs were the principal medicines, *Apothecaries* were herbalists: they became grocers when oriental spices, syrups, tinctures, gums, and all the richer materia medica of the Arabs, found their way, after the Crusades, into England. *Apothecarius*, from *αποθηκη*, a storehouse, (*boteca*, or *boutique*, a shop, is derived from it,) is, literally, *the shopkeeper*, as *chirurgus* (*χειρ*, hand, *εργον*, work,) is, literally, *the handicraft*. The Latin and French *Pharmacopola*, and *Pharmacien* are from Φαρμακον (*φερω μηχος*) Remedy, and its shadow, Poison. Physicians originally compounded the medicines they prescribed ; and Galen mentions that he had a drug-shop in the Via Sacra. But Pharmacy has no direct connexion with medical science : he who collects herb or flower or gum, does not necessarily gain thereby any insight into its properties, or its working upon the animal organisation ; and it was consequently quite as natural, that drugs should be weighed and compounded by the trader as by the physician. Manard deplored the revolution :[*]—*Olim enim ipsimet medici sua sibi quisque medicamenta domi parabunt, et parata adservabant : quibus ubi opus esset, pro arbitrio et ægrotantiam necessitate uterentur.* He laments, that within the last fifty years, the business had devolved upon ignorant persons called *Speciarii*[†] in Italy, (the French *épiciers*,) who were allowed by celebrated physicians to collect and compound simples :—*cæci etiam magis cæcos sequentes.* The regulations of Salernum prove that apothecaries compounded medicines in the 12th century. A letter and bill for medicines furnished for the use of the king, have been discovered in a roll of the wardrobe for the 34th of Edward I., and throw considerable light upon English pharmacy at that period (1306-7.) The writer requests payment, and his letter ends, —" Inasmuch as *Richard of Montpellier*, grocer to the king, (especer le Roy,) is appointed in London to purvey (daler pour diverses pourveances faire) for the king's sickness, as is fully enjoined by the king's physicians, (est pleinement enjoint par les fisiciens le Roy.)" Then follows the *cedula*.[‡]

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[*] Cited from the original document in Proc. of Record Commission, vol. i., p. 75.

[†] Woodal. The Viaticum, 1639. In the ten years, 1621—30, the average price of wheat was 45*s.* a quarter. After the 43d Eliz., the coinage underwent no change of any importance. At the siege of St. Quintin (1557) there were forty surgeons—one to each company. The pay of surgeons, chaplains, drummers, and ensigns, was 1*s.* a-day. At the siege of Calais, (Ed. III.) only *one* surgeon is mentioned on the pay-rolls.—*Unit. Serv. Journ.*, Oct., 1836.

Anno 34to, et anno 35to apud *Landrecost*.

For the disease of our lord the king, by the prescription (ordinacionem) of Mr. Nicholas of Tyngewyk, an ointment of Socotrine aloes (cum aloe cicotrino) and of *cadmeaurus*, a physic (fco) for the king's legs, six times, £11.

Item, for another ointment of dessiccatives and balsam, 6 ounces—20 marcs.

Item, for *cironis* composed of gums, for the king's shoes—110*s*.

Item, herbs for baths of aromatic flowers and stuffs (stuffis)—110*s*.

Item, oil of wheat (de tritico)—30*s*.

Item, oil of ash (fraxini)—18*s*.

Item, pro emplastris cironeis diatrascos hoc sirocrocium 20lb. pro staur.—£4.

Item, diachylon, (de Aquilon,) 24lb.—48*s*.

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[*] J. Manardi Epistolæ Med. et in J. Mesue, Simp. et Composita Annotationes, 1534, p. 564, Ed. Basil, 1540.

[†] Spice, specie, are from the same root—*species*.

[‡] Proceed. of Record Com., vol. i., p. 556-7. The original is in apothecaries' doggrel, and full of contractions.

Item, distilled oil of turpentine—40*s*.

Item, a comforting electuary, (e. comfortativo,) made with amber, and musk, and pearls, and jaspers, and gold, and pure silver, 8lbs.—8 marcs.

Item, sucurosset, (sugar of roses?) sharpened with pearls and coral, (curall,) 4 ounces—5 marcs.

Item, stimulating ointments, (ung. calidis,) 16lbs.—33*s*.

Item, laurel oil, 8lbs.—20*s*.

Item, rosewater of Damascus, (a. rosata de Damasc.) 40lbs.—£4.

Item, pomegranate wine, 20lb.—40*s*.

Item, a plaister for the king's neck, with laudanum (ladanum) and oriental amber—40*s*.

Item, 6 pomegranates—40*s*.

Item, 6½ ounces of balsam, for anointing the body of our lord the king—£13.

Item, an aromatic powder of aloes, frankincense, and myrrh, to put in the king's body—£4.

Item, musk, 3 ounces, to put in the king's nostrils—40*s*.

Item, oriental amber to put in the king's food, and claret, 18 ounces, each ounce a marc—18 marcs.

By command of our lord the king, for *Lord Robert de la Warde*, who was paralytic:

Item, 38 clysters—40*s*.

Item, oleum benedictum, 12 ounces—48*s*.

Item, castoreum, (pinguedine castor.) 16 ounces—48*s*.

Item, an ointment sharpened with the *pulvis castorii* and castor, and the powder of euphorbium (eufurbeo)[*]—69*s*.

The ointment, with balsam and Socotrine aloes, was made for our lord the king, a second time—40*s*.

Item, a precious electuary, which is called Dyatameron, 12lbs., 1 marc per lb.—12 marcs.

Item, for *Lord Peter of Colingburne*, a syrup and medicine—30*s*.

Item, for *John of Hockham*, medicine, syrup, and glister—40*s*.

Item, for *Lord William of Corbye*, syrup and medicine, at Carlisle—2½ marcs.

Item, the carriage of these medicines, from London to Carlisle, going and returning—100*s*.

Summa £114 16*s* 4*d*.[*]

This remarkable document shows that J. Falcland de Luca (1357) was not the first apothecary who sold medicines in England; although it confirms another observation made by Freind, that the crown apothecaries were foreigners. Peter of Montpellier was apothecary to Edward III., A.D. 1360.[‡] The drugs of the East were carried to the ports of Italy and the South of France; which, with the existence of the school of medicine at Montpellier, may explain the French derivation of these apothecaries. Edward I., before his accession, had visited the Holy Land, and no doubt gathered some knowledge of the state of physic in the East. Eleanora is said to have sucked his poisoned wounds; but the story is ill authenticated. At the close of his career, he was at Carlisle, breathing vengeance against Scotland and the Bruce. He died of chronic dysentery, July 7, 1307. The legs probably swelled in the latter stages of the disease. The bill exhibits the articles employed in embalming Edward's body; which was destined to be borne as a banner by the English through the fastnesses of Scotland. Some of the drugs were apparently compounded; others were sent in large quantities to the camp. The king, it would seem, paid the drug-bill of certain noble lords; and if the value of money be considered, the amount was not inconsiderable. The pound of silver was divided into 20s. and 240 pence; but the coin contained three times (2.871) as much pure metal as in the present day, and it was of much greater relative value. At an entertainment given by Edward I., in the 22nd year of his reign, two geese cost 9d.; eight cocks 16d.; two capons 5d.; two pullets 2d.; one hundred eggs 7d.; one hundred herrings 10$\frac{3}{4}$d.[*] Wheat, in 1302, was 4s. a quarter; a cow was valued at 6s.; a fat mutton at 1s.; a ewe sheep at 8d.; a fat lamb at 4d.[†] Now, the amount of the apothecary's bill, 114*l.* 16s. would, at these prices, purchase 456 quarters of wheat, or 380 cows, or 2280 fat sheep; and, reckoning wheat at 50s. a quarter, cows at 10*l.*, sheep at 30s. each, 456 quarters of wheat would now be worth 1140*l.*; 380 cows 3800*l.*; and 2280 sheep 3420*l.* The 114*l.* 16s., in purchasing food, would certainly be equivalent to twelve times the sum, or 1380*l.* of the present money; and this is not inconsiderable for a drug-bill. The oils and spices for the embalment of the body cost 19*l.*=228*l.* The majority of the drugs, it will be evident, were conveyed from immense distances at a great risk. Medicine, as has been already stated, was expensive, and entirely beyond the reach of the peasant and artisan.

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[*] A substitute for strychnine and veratrium?

[†] In the 4th Edward IV., 87*l*. 18*s*. 7½*d*. was paid for physic, to John Clerk, the King's Apothecary.—*Extract from Issue Rolls of Exchequer*, p. 488.

[‡] Hist. of Med., p. 292.

The number of apothecaries increased in the 16th century; and drugs in the 17th century, by the extension of English commerce, were obtained more directly, and in greater quantities, from the East Indies and America. Chemical preparations were also introduced into the Materia Medica, and the apothecaries gained a tincture of chemical art. With regard to their education we know little; yet perhaps we know all. They served, like grocers, a seven years' apprenticeship; and some of them were sent to the free schools, where they acquired a little Latin. The author of an old antidotary says, addressing surgeons: "The receipts are in the Latin tongue, yet if you confer with the apothecaries, where you do not perfectly understand them, or else by the help of a dictionary, they will be unto you both familiar and plain."[‡] There is no reason to believe that the apothecaries could do more than make out the receipts in the antidotaries of the day. They distinguished themselves by little in literature: besides the talented Johnson, who made many additions to Gerard's Botany, and Parkinson, they produced no writer of any note. The apothecaries were separated from the Grocers' Company, and incorporated in 1615.*

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[*] Pell records, extracts from Issue Rolls, 22 Ed. I.

[†] Chronicon Preciosum. Bp. Fleetwood's Works, p. 403.

[‡] Gale, Antidotarie, ann. 1563, p. 78.

The often-cited passage in Romeo and Juliet presents a faithful picture of a low apothecary's shop in Shakspeare's age. It is probable that apothecaries, being more numerous, were not so affluent as in the reign of Edward I. Romeo had, however, noted the penury of this "caitiff wretch," as something extraordinary and exceptional:—

"I do remember an apothecary,
And hereabout he dwells,—whom late I noted
In tattered weeds, with overwhelming brows,
Culling of simples; meagre were his looks,
Sharp misery had worn him to the bones:
And in his needy shop a tortoise hung,
An alligator stuffed, and other skins
Of ill-shaped fishes; and about his shelves
A beggarly account of empty boxes,
Green earthen pots, bladders, and musty seeds,
Remnants of packthread, and old cakes of roses,
Were thinly scattered to make up a show."

In a dearth of skilful practitioners, and when all the world had physical pretensions, it is not astonishing that the apothecary, however ignorant of medical science, should practise, as he had recipes and remedies in his possession; only one slight link in the chain was wanting, the knowledge when to apply these therapeutic agents. The apothecary practised extensively in the 16th century, as is evident from passages like the following, in "The Four P's; or, *the Palmer, Pardoner, Poticary, and Pedlar*," a drama, by J. Heywood, (1547,) the friend of Sir Thomas More; who, it is said, pointed some of his satire:—

"Whome have ye known dye honestly
Without helpe of the Poticary?
Nay, all that cometh to our handlinge
Except ye happe to come to hangynge,
That way, perchance, ye shall not myster
To go to heven without a glyster.
But be ye sure I wolde be wo
If ye shulde chaunce to begyle me so.
As good to lye with me a night
As hang abrode in the mone light.
There is no choyse to fle my hand,
But as I said into the bande."

Henry VIII. appointed John *Soda*, apothecary to his dearest daughter, Lady Mary—*pro meliori cura, et consideratione sanitatis suæ*—at a salary of forty marcs sterling; and, at the same time, Michael Delasco was made her physician, with a salary of a hundred marcs.† The physicians began to betray jealousy. "What," exclaims a Doctor of Physick, "maketh many apothecaries, now-a-dayes, to set so little by the physitians? This is one chief cause: they play the physitians themselves ; they give and minister medicines of their own devise (God wot, a mad device) indifferently unto all men ; yea, and the more ignorant they are, the bolder they are; for who is so bold as blind Bayard? Many of them will not sticke to looke in water, and not be ashamed even in the physitian's presence, to ordain this or that medicine for any kind of disease. If any physitian do gently admonish them of their fault, and specially of giving of medicines after their own brain, they will say, that they may as well prescribe medicines, as physitians sometimes do use to make them. They may play (say they) as well the physitians, as the physitians play the apothecaries, as though a physitian and an apothecary were all one! * * *. And, now-a-days, most part of them (Chirurgians) doe all things * *. They stick not to give electuaries, syrups, and other medicines, themselves; yea, and purgatives also: which thing, methinks, is very uncomely."*

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* The Charter is dated May 30. Jac. I.
† Rymer's Foedera, 1537, June 29th. 28 Hen. VIII.

Dr. Winston, (1575—1655,) the son of a carpenter, who had realised by 1642 an estate of 500*l.* a-year, was esteemed by his biographer, Dr. Hamey, a benefactor of the college, because he upheld the dignity of the faculty against the apothecaries. He used but one himself, and treated him as a servant—*heriliter imperavit.*

Towards the conclusion of this period, open war was declared between the physicians and apothecaries: the college, by a joint stock, erected several dispensaries in town, where, after physicians had given their advice gratis, the patients procured the physic prescribed, for a third, and generally less, of what the apothecaries exacted. In 1703, the College of Physicians brought an action against William Rose, apothecary, for visiting a patient, and sending him several parcels of physic, as proper for his distemper, without any fee for advice. The court decided that this was practising physic. But the judgment was reversed in the House of Lords: it was urged before their Lordships that the decision would lay a heavy tax on the nobility and gentry, who could have no medicine in the slightest cases, or even for their servants, without giving a fee to a member of the college; and that it would oppress poor families, who could not bear the charge of a fee.† The dispensary war belongs to the subsequent period; where we shall find the unlearned drug-dealer daily growing beyond Dr. Johnson's galling definition of an apothecary:—"A man whose employment is to keep medicines for sale."

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* A detection of some faults in unskilful physitians, ignorant and careless apothecaries, and unknowing running chirurgians.—Written by a Doctor of Physick in Queen Elizabeth's days: ed. 1651, pp. 157-8.

† See Reports in Appendix to Wilcock's Laws of Medical Profession, p. xciii. The faculty of Paris preserved the apothecaries in better subordination. They swore once a year:—1st, to obey the faculty—2nd, to administer no physic without a physician's advice—3rd, to allow their shops to be visited twice a year by the dean, and four regents of the faculty. They were licensed by a jury composed of master apothecaries, and of doctors. An oath was read to the candidates on their admission, by a regent of the faculty, and they responded at the end of each clause, *Juro*, or *Je jure*. In *Le Serment des apoticaires chrestiens et craignans Dieu*, dating from 1500, and employed long after 1624, the apothecary swears very promiscuously to live and die a Christian—to honour and serve, not only the doctors who had instructed him in pharmacy, but the *maistres pharmaciens*—not to slander his ancient preceptors—not to teach idiots, and the ungrateful, *les secrets et raretés d'icelle*—to give no purgative to patients labouring under acute diseases, without consulting a learned doctor—to execute the physician's orders, neither adding to nor taking from his prescriptions—and to keep no bad or old drug in the shop! The next clause is entirely Gallican:—*Item*, De rapporter tout ce qui me sera possible pour la gloire l'ornement, et la majeste de la medicine! The remaining clauses relate to medica

The salaries of the medical officers of the crown have been incidentally mentioned. I proceed to give several examples of these medical appointments, and it will be recollected that all the great barons had medical attendants of a similar description upon their vast feudal establishments. Soda's salary was four-tenths the amount of the physician, Delascos's; but the apothecary's principal profits accrued upon the drugs. The medical officers of the king had been sometimes paid in church preferment; at other times they obtained a monopoly, or privileges. Thus Henry VIII., in 1539, gave *Antonius Ciabus*, his surgeon, a licence to purchase *sexcenta Dolia* (pipes) *sive Tonella vinorum Vasconiae*, beyond seas, and to sell it either himself or by factors.

1363. Edward III. ordered the treasurer to pay his physician 20*l.* for his services.

1368. Edward III. granted Peter of Florence—physician to the king and to Queen Philippa—40*l.* (= 400*l.*) a year for life. The physicians formed part of the household at this period.

1513. Henry VIII. made *Marcellus de la More*, in consideration of his daily service, Serjeant Surgeon (serviens chirurgorum) for life; and then follows a formula which, as it is repeated in the subsequent grants, shall be given in the official Latin:—Cum Foedis et vadiis, tam de Hospitio nostro quam aliter, eidem officio ab antiquo debitis et consuetis habendis et percipiendis modo et forma antehac usitatis, simul cum omnibus allocationibus *le Bouge le Courte*, quam Vini, Ceri, et aliorum requisitorum, et pro Curis, et cum omnimodis Praeheminentiis, auctoritatibus, proficuis, commoditatibus, et advantagiis dicto officio pertinentibus. The fees and perquisites had been settled by long usage; and Marcellus de la More was insured all the advantages any other person enjoyed in his office under Edward IV. or any of the King's ancestors.

1547. Edward VI. granted *Thomas Wendy, Esq.*, for his services to the king's father, an annuity of 100*l.*; and made him his physician (medicum nostrum) for life, with the other fees, profits, &c., &c. The *life annuity*, not salary, of 100*l.* a year, had apparently been fixed at an early period. A century previously it would have been equal to 1,200*l.* a-year of the present money. It was an inconsiderable sum in the debased coinage of Edward VI. The physician was paid as the poet laureate has been paid down to the present day, in money and kind. The latter mode of payment was some protection against the deterioration of the currency.

1547. Edward VI. granted his physician, *Dr. Thomas Bille*, 100*l.* a year, to be paid quarterly, *necnon vadia et Foeda*, for services rendered to himself, and his father.

police. He swears not to give any *potion abortive*, not to administer poison, or to counsel another to give poison, even to his greatest enemies. *Item*, De ne toucher aucunement aux parties honteuses des femmes que ce ne soyt par grande necessiie c'est a dire lorsqui' il sera question d'appliquer dessus quelque remede. *Sabatier, Hist. de la Fac.* p. 28.

1550. Edward VI. granted Dr. *Robert Huyke*, physician to Henry VIII., and Queen Catharine, an annuity of 50*l.*, and constituted him his physician *extraordinary* for life, unless he obtained any promotion of the clear annual value of 50*l.*

1553. Mary constituted *Thomas Huys*, her physician, at an annuity of 100*l.* a year for life, with the diet (dietis,) allocations of wine, wax, *Bouge le Courte*, all emoluments, &c.

1559. Elizabeth appointed *Richard Master*, her physician, at the same salary, &c., as Huys.

1560. Elizabeth appointed Dr. *Robert Huyke*, one of her physicians in ordinary; with an annuity of 100*l.*; this not to be to the prejudice of the annuity granted by Edward VI.

1562. Elizabeth granted *Richard Ferris*, a salary of forty marcs, =26*l.* 14*s.* a year, with the fees, &c., in the form used on the appointment of Marcellus de la More, (*vide ante.*) In the 35th Henry VIII., and the 3rd Edward VI., Ferris had obtained grants of 20*l.*, and 40*l.* a year—*quoddam vadium*—in lieu of which the queen granted him 40*l.* a-year.

1566. *Robert Balthorp*, the principal surgeon to Elizabeth, was appointed Serjeant Surgeon, at forty marcs a-year, and all fees, &c.

1572. Dr. *Thomas Frances*, was appointed one of the physicians in ordinary to Elizabeth; annuity, 100*l.*

1573. Dr. *Julius Borgarntius* was appointed physician of the household, *officium medici nostri et hospiti nostri*, with an annuity of 50*l.* a year, in place of Dr. Bentley, who held the office in the time of Henry VIII.

1585. Dr. *Roger Gyfford* was appointed one of the physicians in ordinary. Annuity, 100*l.*, &c. (Ut. A. 1553, Huys.)

1598. *John James*, "a rare tongue man, and wise," was made physician of the household, at 50*l.* per annum; and R. Lopius, successor to Borgarntius, at 40*l.* a year, (ut 1573.)

1603. James, on his accession, brought with him Dr. Craig—J. Craigus ordinarius et primarius medicus noster—and granted him an annuity of 100*l.* a year, with the fees, &c., (v. 1553.) One innovation appears in the grant; for *allocatio Vini*—is substituted *Vini cerevisiae;* it is not clear that the liquor affected by Dr. Craig was not mountain-dew; the Scotch *Ranz des Vaches.*

1603. Martin Schover was at the same time appointed physician to Queen Anne, at the same salary. It is here vini, not vini cerevisiae.*

Linacre, Caius, Mayerne, Harvey, Bidloo, and other physicians to the English sovereigns, are elsewhere mentioned.

As physicians originally belonged to the Church, they preserved something of the ecclesiastical pomp; the gold-headed cane, the gold chain, the wig, and the scarlet robe ministered to the wearer's vanity, and had an imposing effect upon the populace. Chaucer's Doctor of Phisick was clad in "sanguine and in perse." Henry IV. (1410) granted Helia Sabbot, Hebrew, and Doctor of Medicine, letters patent, allowing him to travel with ten esquires, through the king's dominions.† The following picture was probably drawn from the life; the scene is London in a time of plague:—"For thither within this two hours I did see Master *Toocrump* (medicus) solemnely ridying upon his mule with a side goune, a great chain of golde about his necke, his apothecary Crispinus, a neighbour's child borne hereby in Barbarie, and his little Lackey, a proper young apple-squire, called Pandarus, which carrieth the keye of his chamber with hym. These are all gone in at the gates to that noble Italian."* It is related that Dr. Simon Fox, son of the martyrologist, and Dr. Argent, were the last presidents of the College of Physicians who rode on horseback to visit their patients.† English, like French surgeons, wore gowns, as is seen in the picture at the College of Surgeons, representing the grant of the charter by Henry VIII. The artifices of costume, still retained by the legal and ecclesiastical professions, were laid aside by physicians, when they had no occasion to address the vulgar astonishment of mankind.

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* Rymer's Foedera, under the respective dates.

† Rymer's Foedera.

In the Saxon and Roman periods England derived skilful medical attendants from abroad; so early as the reign of Mary, matters were reversed. Physicians were exported. The commercial relations with Russia, opened by Chanceller, (1553,) and Jenkinson, (1557,) through Archangel, were fostered by the government; and Jenkinson delivered, as is recorded in the Russian archives, presents from Queen Mary, of a lion, a lioness with her living cubs, certain doctors, (fellows of the new college,) arms of various kinds, a quantity of scarlet cloth, an atlas, with other foreign articles, besides several mechanicks and miners.‡ Dr. Standish, and R. Elmes, chirurgeon, were among the doctors sent to the fierce Ivan II. In 1581, Elizabeth addressed two letters, one to the emperor, and one to the empress. Dr. James was the bearer. The virtues of the Empress of all the Russians had been lauded so highly, particularly by Dr. James, and her fame was so great, that Elizabeth loved her in her heart, and could not but be solicitous for her health. Hence she had not only (as the czarine had desired) sent her a skilful midwife, who could alleviate, by science, the pains of childbirth; but also Dr. Robert James, her own physician, (qui nostram valetudinem curare solebat,)—a faithful man, already well known to the empress—that he, by his skill in the medical art, may direct the proceedings of the midwife. In a letter, dated Oct. 24, 1583, she prays that Dr. James may have that place in Ivan's favour, which was accorded by good princes to men of such approved virtue. She never would have dispensed with his services, had it not been for her friendship for the czar, and her desire to gratify him. James Frenchman, an apothecary, and several army surgeons, accompanied Dr. James. In the letter of 1583, the Queen entreated Ivan to grant Frenchman a discharge; he had been ten years before in her own service. The czar refused to discharge the apothecary, at the head of the court pharmacy, until another arrived. Ivan died in 1584. In 1594, another letter was addressed to Boris Fedorowitsch Godunow, the brother-in-law of Fedor I., into whose hands the weak czar had abandoned the government. The queen had been advertised by her merchants that his lordship was desirous to have an English physician in the emperor's service. Having been solicited to that effect, by the Lord High Treasurer of England, William Lord Burghley, she assented. Dr. Ridley was nominated. Fedor died; and Boris was elected emperor in 1598, when Elizabeth wrote to congratulate him on the event; in the same letter she prayed "at the request of the friends of Mark Ridley," that his majesty would grant the said Mark Ridley, Thomas Ridley, and L. Nightingale, his "high licence to depart." From other letters it is evident that the court physicians were not free agents. By a royal letter, (1601,) we learn that Dr. Wyllys was dismissed from Russia without entertainment. The charge was, (1) that he had letters which he did not deliver; (2) that he had no books or other provisions meet for his place. To this it was replied, that he had sent both his books and drugs by sea. A succession of English physicians has, since 1557, been entertained at the court of the czar. Dr. A. Dee (1621-34) had a yearly salary of 250 rubels, besides 72 rubels monthly, and 1114 silver rubels yearly, for board, without reckoning provisions procured from the crown stores. There were ten apothecaries in 1631, and two of them were English. Drugs were then chiefly obtained from England, Holland, and Germany. Dr. Samuel Collins, the celebrated anatomist, was eight years in Russia, (1659-1667.) The state of medicine in Russia presents an exact picture of the state of things in England during the Saxon and Norman periods. Foreign drugs and physicians were introduced at the courts, but the common people had no medical attendance; nor was this allowed, if it existed in Russia, without special permission.*

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* A Dialogue both pleasant and pitifule, &c. By W. Bullein. Ed. 1573.

† Aikin's Biog. p. 276.

‡ Russichen Stuffenbuche in Richter's Geschichte der Medizin in Russland. Vol. i. p. 299.

The names of the principal writers will exhibit the progress of *medical science* in the three centuries, 1400-1711. When an author was of any note in his age, one of his works is specified.

The dates of the writer's birth and death, when known, are given: *d.* stands for died; *b.* for born; *f.* for flourished.

FIFTEENTH CENTURY.

John Marfelde, flourished in the reign of Henry VI. Praxis Medicinæ.

Nicholas Hostresham, *f.* 1443. De Modo conficiendi, et dispensandi. L. 1.

SIXTEENTH CENTURY.

Linacre, 1460-1524. De Sanitate Tuenda, (Tr. from Galen,) 1517.

T. Vicary, Serjeant Surgeon to Hen. VIII., Ed. VI., Mary, and Elizabeth. A Treasure for Englishmen, containing the Anatomy of Man's body, 1548.

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* Qui (Magnus Muscoviæ Dux) si quis ad mortem laboraret, ne permisit quidem, ut e suis medicis aliquis ægrotum invisat, &c. *Moscov. Antonii Possevini. Ant.* 1587. P. 75.

W. Butts, d. 1545.

J. Chambre, d. 1549.

Sir Thomas Elyot. The Castell of Health, 2nd Ed., 1541.

Andrew Borde (Merry Andrew.) Breviarie of Health, 1547.

Recorde, d. 1558. The Urinal of Physick, 1547.

Phayer, d. 1560. Treatise on the Pestilence, (Tr.) 1544.

Turner, d. 1568. On Bathes in England, 1562.—Herbal, 1551.

J. Jones, f. 1556.

Thomas Gale, b. 1507. Institution of a Chirurgeon, 1563.

Kaye (*Caius,*) 1510-73. A Boke of Conseill against the Sweat, 1552. —De Ephemera Britannica, 1556.

Bulleyne, d. 1576. Defence against all Sicknesse, Soarnesse, and Wounds, 1562.

R. Caldwell, 1513-85.

Clowes. A briefe and necessary Treatise touching the cure of the Disease now usually called Lues Venerea, 1585.

T. Moufet. De Jure et Præstantia Chemicorum.

Gwinne, f. 1596. Medicamentorum, 1584.—Health's Improvement.

The names of *Wotton, Owen, Hyll, Gibson, Clement, Securis, Etheridge, Baker, Banister, Baley, Halle, Rhese, Butler, Lowe, Anthony* and *Banister,* have also been preserved.

Seventeenth Century.

Gilbert. De Magnete, 1600.

Mayerne, 1573-1655. Medicinal Counsels, 1677.

Arthur Dee, b. 1579. Fasciculus Chemicus.

Gulston, d. 1632.

Winston, 1575-1655.

Harvey, 1578-1658. De Motu Cordis, 1628.

Venner, 1577-1660.

Ent, 1603-89.

T. Johnson. The Herbal gathered by J. Gerard, enlarged by T. Johnson, 1633, (apothecary.)—He also translated Ambrose Paré.

Glisson, 1597-1677. Anatomia Hepatis, 1654.

Kenelm Digby, 1603-65. On the Sympathetic Power, 1658.

Parkinson (apothecary.) Theatrum Botanicum, 1640.

Sir T. Browne, 1605-82. Religio Medici, 1642.

Wharton, 1610-1673. Adenographia, 1656.

Highmore, 1613-85. Corporis Hum. Disquisitio Anatomica.

Willis, 1622-1675. Cerebri Anatome, 1664.

Charleton, 1619-1707.

Sydenham, 1624-89. Observationes Medicæ, 1666.

Lower, 1631 (?)-91. T. De Corde, 1669.

Grew, 1628-1711.

Locke, 1632-1704. On the Human Understanding.

Goddard, f. 1668.

W. Briggs, 1641-1704.

E. Browne, 1642-1708.

R. Talbor, 1642-81.

Mayow, 1645-79. Tractatus quinque Physico-medici, 1669.
Floyer, 1649-1734.
Wiseman. Chirurgical Treatises, 1676.
Bidloo, 1649-1713. Anatomia Corporis Humani, 1685.
Chamberlen, 1664-1728.
S. Collins. Systema Anatomicum, 1685.
R. Morton. Phthisiologia, 1689.
Keil, 1673-1719. Account of Secretions, 1708. Anatomy of the Human Body, abridged, 11 editions between 1698-1745.
Cheyne, 1671-1743. On Health and Long Life.
Gideon Harvey, 1699.
W. Cowper, d. 1710. Myotomia reformata, 1694.

Science made no evident progress in England during the 15th century. Friar Bacon, Wickliffe, and Chaucer were dead; and the energetic intellect of the people fell struggling to the ground. Medical science scarcely exhibited a trace of its existence. No insect, or "bird of the air, or beast of the field," gave a sign of animation; it was the still morning of a harvest day.

Italy—the fruitful soil upon which Roman civilization decayed, had given birth to flourishing republics—and commercial cities—Milan, Genoa, Pisa, Florence, and

> "Fair Venice, flower of the last world's delight;"

besides Naples, and imperial Rome. Petrarch and Boccaccio sprang up; but before them the majestic Dante—vigorous as the giants of a young world—and then Leonardo da Vinci, the harbinger of Michael Angelo and Raphael. The pure sciences came with the Greek literature, carried thither by Chrysoloras, Theodora of Gaza, Callistus, Chalcondylas, Lascaris, and other refugees who escaped from the ruins of Constantinople (1453.) From the death of Galen, (200), an unbroken series of Greek physicians had been maintained in the empire. Oribasius, Aëtius, Alexander of Tralles, Paul of Ægina, Simeon Seth, and Johannes Actuarius, were authors of works that have escaped oblivion; and Hippocrates, Aretæus, and Galen, in their native language, were always accessible to the Greeks in the public libraries.

The light shone there, either in Alexandria or in Constantinople, during the darker periods of our long pilgrimage, but never reached Britain, except in scattered rays, until the sixteenth century. The princely Medici of Florence—who, it may be said, in passing, had the marks of a physical extraction upon their escutcheon, as well as in their name—were among the most generous patrons of science. They collected manuscripts, welcomed the Greeks in Italy, and founded libraries, schools, academies, societies. Linacre, a young Englishman, attracted the notice of Lorenzo de Medicis—the *magnificent—the father of the Muses*, as he was gratefully designated—and Linacre was invited to attend the lectures of Chalcondylas with Lorenzo's sons. On quitting Florence, Linacre went to Rome, and there studied medicine and natural philosophy; he returned, it is said, the first Englishman who could read Aristotle and Galen in the original, and in the latter years of his life

(1517—24) published translations of several of Galen's works in classical Latin. His were the first, and the best translations of Galen. Caius visited Italy; and studied, criticised, translated the ancients, with as much ardour as Linacre. All the English physicians of any celebrity, down to Harvey, resorted to Italy, where they not only heard the ancients read, but saw bodies dissected, and physic taught with zeal and success. The anatomists, Vesaius, Eustachius, Ingrassias, Columbus, Fallopia, Varolius, Fabricius ab Aquapendente, who made innumerable discoveries, all flourished in the Italian schools of the sixteenth century.

The ancients were assiduously studied in the sixteenth century, and the ardent students desired to understand and to see what the ancients had seen. They discovered that their great teachers had seen but in part; and were no longer, like Linacre, content to copy, but began to imitate them in the dissection and observation of nature. Nearly all the parts, organs, and structures of the body were examined and described. English physicians had hitherto possessed no direct, exact knowledge of the human body. They had now opportunities of carrying on dissection, and seeing the parts demonstrated before their eyes. Physiology made rapid progress. Harvey discovered the circulation of the blood (1619.) Transfusion was performed (1657.) Malpighi saw the capillary circulation (1661.) Leeuwenhoeck described the flat, oval blood-globules (1690.) Bathurst and Henshaw proved by experiment that the subtraction of oxygen renders the air irrespirable (1654); Hooke showed before the Royal Society, that animals die in altered air, because it has lost its oxygen. Mayow taught that oxygen enters the blood through the lungs, combines with the saline particles of the blood, and strikes a red colour. He compared respiration to combustion (1668.) The lacteals, and lymphatics were discovered—the brain, and nerves described. Harvey wrote the history of the ovum. The organs of the body were examined after death, and the alterations recorded. Practical medicine underwent great changes. The pathological doctrines of the ancients were scarcely understood before they were fiercely assailed by the alchemists. Chemistry threw a new light on the elementary composition of bodies; and placed antimony, the preparations of mercury, the mineral acids, various salts, ether, tinctures, and concentrated extracts, in his hands of its cultivators. Paracelsus, the Luther of physic, opened his lectures at Basil by burning the works of Avicenna and Galen. The immense progress of the physical sciences in this period —which witnessed the promulgation of Newton's Principia—re-acted on medicine. The systems of Vanhelmont, Descartes, Sylvius, Stahl, and Hoffmann reigned, but never gained the same ascendency in England as the Iatro-mathematical school at the close of the 17th century.

A better experimental school originated in England. It was founded by Sydenham, and his rival Morton. Lord Bacon (1569-1620) led the way, and "noted the deficiencies." He censured physicians for discontinuing the serious diligence of Hippocrates, who used to set down a narrative of the special cases of his patients, and how they proceeded, and how they were judged by recovery or death. They inquired not much of the footsteps, and impressions of diseases; nor of the structure of the organs, the secrecies of the passages, the nestling of the humours. *Anatomia vivorum* was justly reproved by Celsus; yet the useful inquiry need not have been relinquished altogether, but might have been well diverted upon the dissection of beasts alive. The seats and different kinds of humours should have been examined. All morbid productions, and changes ought to have been exactly observed by a multitude of anatomies, and the contributions of men's several experiences, and carefully set down, both historically, according to the appearances, and artificially, with a reference to the diseases and symptoms which resulted from them, in cases where the anatomy was of a defunct patient; whereas now upon opening of bodies, they are passed over slightly and in silence. They abandon the cures of many, pronouncing them incurable, or past the period of cure; while they ought, contrarywise, to attend, facilitating and assuaging the pains and agonies of death. They tie themselves to no receipts severely and religiously. They should seek for specifics. He found it strange that no man had sought to make an imitation of natural baths, and medicinable fountains. The prescripts in use are too compendious to attain their end: it is order, pursuit, sequence, and interchange of application which is mighty in nature. Physicians visit daily; yet let a man look into their prescripts and ministrations, and he shall find them but inconstancies, and every day's devices without any settled providence or project.* Such ideas could not remain unproductive.

Sydenham taught the manner of making further progress in physic most effectually—by example as well as by precepts. The improvement of physic, in his opinion, depended, (1.) upon *collecting a genuine and natural description or history of all diseases;* and (2.) *upon laying down a fixed, complete method of cure.* Sydenham analyzed, distinguished, and described diseases. At this time it is difficult to appreciate his contributions to the history of diseases. Let us imagine a person, ignorant of physic, entering a large hospital, where every species of disease to which men are liable exist; to his mind all the symptoms would present a scroll of inextricable confusion—phenomena running into each other, separated by no line of demarcation, arbitrary, accidental, and agreeing in nothing but helplessness, deformity, suffering, wasting, death—one vague idea, which he would express by sickness. Although English physicians, taught by the ancients, began before Sydenham's time to distinguish the species of diseases, their ideas were exceedingly vague and ill-defined. In the historians, one word, *pestis*, designated all the epidemics: Fever, Dysentery, Cholera, Small Pox, Measles, Influenza, Erysipelas, were confounded. It is believed that Hippocrates included Small Pox under his description of Fever.† The laws of diseases could never be determined, nor the treatment regulated accurately, so long as the morbid phenomena remained unclassified. Sydenham succeeded to an extent which had never before been attained in reducing diseases to certain determinate kinds. He laid aside all hypothesis, and then noted with the utmost accuracy the manifest and natural phenomena of diseases; imitating in this the exactness of painters, who, in their pictures, copy the smallest spots or motes in the original; while he, at the same time, distinguished the characteristic, constant symptoms from accidental phenomena, varying with circumstances. A symptom induced by age, constitution, or treatment, ought not to enter into the description; it no more belongs to the history of the disease than the biting of the palmer worm to the characteristic marks of sage. Notwithstanding some variety happens from peculiarity of constitution and treatment, nature acts in that orderly and equable manner in producing distempers that the same disease appears attended with the same symptoms in different subjects, so that those which were observed in the illness of Socrates, may generally be applied to any other person afflicted with the same disease in the same manner, as the general marks of plants run through the same plants of every kind. Whoever describes a violet exactly as to its colour, taste, smell, and other properties, will find the description agree, in most particulars, with all the violets in the universe. The humours retained in the body beyond their time, undigested, tainted by the constitution of the atmosphere, or poisoned, are worked up into a *substantial form, or species, that discovers itself by particular symptoms, agreeable to its peculiar essence.* A quartan ague mostly comes in *Autumn*, keeps a certain course, the paroxysms returning as certainly every fourth day as a clock renews its rounds; it begins with a shivering, and a great sense of cold, succeeded by heat, and terminated by a profuse sweat; it seldom disappears before the vernal equinox. Now, upon duly considering these facts are there not as strong reasons to believe that this distemper is a species, as that a plant is one, which, in like manner, springs out of the earth, flowers, and dies, and is in other respects affected agreeably to its nature and essence?*

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* Of the Advancement of Learning, by Francis Lord Bacon.

† Life of Jenner, by Baron, vol. i. p. 179.

A sketch from the *Procesus Integri* will illustrate the fidelity and singular felicity of Sydenham's *pictures* of diseases:—

"*St. Vitus's Dance.* This disorder is a kind of convulsion, which seizes children of both sexes, from the tenth to the fourteenth year; it manifests itself by a halting or unsteadiness of one of the legs, which the patient draws after him like an idiot. If the hand of the same side be applied to the breast, or any other part of the body, the child cannot keep it a moment in the same posture, but it will be drawn into a different one by a convulsion, notwithstanding all his efforts to the contrary. Before a child who has this disorder can get a glass or cup to his mouth, he uses abundance of odd gestures; for he does not bring it in a straight line, but his hand being drawn sideways by the spasm, he moves it backwards and forwards, till at length the glass coming accidentally near his lips, he throws the liquor hastily into his mouth, and swallows it greedily, as if he meant to divert the spectators."

Many of the methods of cure laid down by this great man have stood the test of experience. He deprecated a complicated Materia Medica, introduced simpler and more efficacious remedies than had been known, and better suited to the different forms and stages of disease; he banished the hot, close treatment of small pox and fever then prevailing from rational practice, and led the way to equal reforms in other departments of therapeutics.

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* This is the ground of Shoenlein's doctrines. Sydenham's works, by Wallis, vol. i., pp. 1—34.

The character of Sydenham and some of his contemporaries evinces a great progress in medical morality. There remained no trickery, no secrets, no consecrated deceit, no avarice, in the foremost man of the age. Harvey followed Charles in his worst fortunes. The munificence of Radcliffe, Mead, and Sloane, in their patronage of science, has never been surpassed by the hereditary nobility. Sydenham, in Johnson's words, "was benevolent, candid, and communicative, sincere and religious; his whole character was amiable, and his chief view was the benefit of mankind." Sydenham was born in the year 1624; in 1642 he commenced a commoner of Magdalen Hall, in Oxford. He was a republican, and at this early age fought for his principles in the army of the parliament, where he attained the rank of Captain;[*] at the age of twenty-four he obtained, at Oxford, the degree of Bachelor of Physic. About the same time he became a fellow of All-Souls College, after having recognized by subscription the authority of the visitors appointed by the parliament. He practised thirty-three years, chiefly at Westminster; and died on the 29th of December, 1689. He was a martyr to gout and stone in the kidneys. In treating of the latter he sketches his personal habits; not to omit mentioning any thing that may be serviceable to those labouring under the same diseases. "In the morning, as soon as I am up, I drink a dish or two of tea, then I go out in my coach till noon, and at my return home I dine moderately upon any kind of meat I like, that is easy of digestion: for moderation is principally necessary. I drink a little more than a quarter of a pint of canary immediately after dinner every day, to promote digestion and drive the gout from my bowels. In the afternoon I go out in my coach,[†] and when business permits take a turn into the country for good air. A draught of small beer serves me instead of a supper, and I drink another draught after I am in bed and about to compose myself to sleep. I always prefer small beer brewed with hops to that which has none."[‡]

He bore physical suffering without a murmur. His treatise upon gout closes calmly: "and if the racking pains, unfitness of motion, and other disorders with which I have been afflicted during the greatest part of my life, together with the loss I have sustained in my profession by sickness, may be a means of relieving others, I shall have some reward for the miseries of this kind which I have suffered in this life, now I am leaving it for another." In addressing Dr. Brady, he has the following striking passage:—"I have always thought it a greater happiness to discover a certain method of curing even the slightest disease, than to accumulate the largest fortune; and whoever compasses the former, I esteem not only happier, but also better and wiser. For, can a person give a stronger proof of his benevolence and wisdom than by endeavouring always to promote the public good, rather than his private interest, as he makes so small and inconsiderable a part of the whole?* and, in reality, as it is the part of a wicked man to destroy his fellow-creatures, so it is the duty of a good man to preserve them, and instruct others how to save them from death, even after his own decease. Nor can any thing be more inhuman and detestable than to insinuate a disregard and unconcern for whatever misfortunes may happen to mankind after our death."*

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[*] Gentleman's Magazine, vol. lxxi., p. 684.

[†] Harvey visited his patients on horseback, with a foot cloth, in the same way in which the judges were then accustomed to ride to Westminster Hall.

[‡] Works, vol. ii. p. 384.

All his works were delivered to the world, after deep meditation, and his great practical improvements advanced in a manly but extremely modest temper. Yet, he had many enemies. He censured vain speculations in strong terms; and did not spare those who screened their ignorance and idleness with the specious pretence of an extraordinary respect for the ancients. Nearly all the Faculty exclaimed against him. Still, he had a firm faith in his doctrines, and trusted to Time, the discoverer of Truth. He beheld the ingratitude of his contemporaries mournfully, and not bitterly; and never suffered their conduct to dry up the fountain of his great heart. "I find," he profoundly observed, "that *it is better to assist mankind than to be commended by them*, and highly conducive to tranquillity of mind; for popular applause is lighter than a feather—a bubble—and less substantial than a dream."

Sydenham had not to contend against individuals, but against the College of Physicians; all the machinery of that corporation was set in motion to crush his daring genius. That this was the strong tower of his persecutors, is distinctly stated in a passage preserved by Dr. Lettsom. The writer ascribes the "calumny and ignominy" which Sydenham endured, to the "emulation of some of his collegiate brethren, and others, whose indignation at length arose to that height, that they *endeavoured to banish him as guilty of medicinal heresy, out of that illustrious society.*"†

I proceed to mention a few more of the scientific discoveries of the age. Dr. Halley invented a Table of Mortality, showing the probability of dying, and the mean future duration of life, at every age, from observations made at Breslau. This was the first successful application of the doctrine of probabilities to medicine. It proved that vital phenomena, taken in large masses, are constant, and susceptible of mathematical investigation. Halley's beautiful and simple construction was one of the most important accessions made by medical science in this eventful time.

It would be an endless task to attempt to display all the modes of treatment adopted; I shall select one or two as specimens. In an order against the plague, given at the command of Elizabeth, by the College of Physicians, "the best learned in physick within this realm," the people were told:—"make fire rather in pans, to remove about the

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[*] Vol. i. p. 430.

[†] Gentleman's Magazine, vol. lxxi., p. 684. From a MS. fifty years in the possession of Dr. Sherson's family.

chamber, than in chimnies, as it will better correct the air of the houses." In 1636, this advice is repeated, but a piece of iron is directed to be put in the fire. At the same time, the College recommended two ounces of rancid oil, as an emetic. In 1665, a refinement is introduced, and people are told to take for the same purpose, carduus posset, or warm water, "provoking with a *feather or finger in the throat, as is usual.*" The College disdained the antimony of the ignorant chemists; and Louis XIV. had not given 1000 *louis d'ors* for the secret of ipecacuanha (1681.) The discoveries of the nature of respiration demonstrated the fatal nature of the directions of the College. The delicate and tender are directed to make a toast of white bread, to sprinkle upon it a little wine vinegar, made with rose-leaves, then to spread a little butter on the toast, cast on it a little powder of cinnamon, and eat it in the morning fasting. "The poor, who could not get vinegar nor buy cinnamon, might eat bread and butter alone, for *butter is not only a preservative against the plague, but against all manner of poisons.*" The college in its collective wisdom, gave the following prescription for the *swellings* in plague: "Pull off the feathers from the tails of living cocks, hens, pigeons, or chickens, and holding their bills, hold them hard to the botch or swelling, and so keep them at that part until they die, and by this means draw out the poison." These ingenious devices vanished before the clear sense of Sydenham's school.

The progress of surgery was quite as apparent. The Saxons knew no mode of staunching blood; as this was indispensable in surgical operations, it engaged great attention. In amputations the limb was seared with a hot iron, which coagulated the blood, and formed an eschar over the mouths of the vessels. Some had their arms and legs taken off with red-hot irons. Many of them perished, especially in the London hospitals. The patients would rather die with the member on than abide the terrible fire. Various caustic powders were resorted to as substitutes for the iron, but *dismembering* remained a fearful business for the patient.* "Let him," says Woodal, "prepare his soul as a ready sacrifice to the Lord by earnest prayers, craving mercy, and help unfeignedly."† He tells the surgeon to tie a ligature round the femoral artery, if he can. Ambroise Paré discovered, or re-discovered the fact that the blood flows from a few vessels; and that profuse bleeding may be arrested by half-a-dozen threads employed as ligatures. Harvey's doctrine of the circulation lent support to the practice; and instead of searing the stump with a red-hot iron, the arteries were tied with silk ligatures in London, at the beginning of the seventeenth century.

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* Gale, Enchiridion, p. 63.

† Woodal was surgeon to Bartholomew's Hospital. He was a puritan, and declares in his preface that the "gift of healing is no lesse than one of the gifts of the Holy Ghost; * * and was transcendent successively on those whom he had preordained and chosen unto the medicinal function!!" He states that no surgeon of our nation had published any book of the true practice of surgery to the benefit of the younger sort, his mean treatises only excepted—a falsehood, or a piece of envy; for the works of Gale and Clowes preceded his treatises.

Union, by first intention, or without suppuration, was not practised, although the admirable operations of Taliacozzi demonstrated its possibility.

Gale mentions, among the surgeon's instruments, incision shears, an incision knife, a flewme, a lance, a cauterizing iron, a pair of pincers, or nippers, a probe, a crooked hook, a needle, and a quill; a trappan, speculum oris, speculum matricis (1581). A great number of instruments are figured in the "Surgeon's Mate" (1617). Wiseman used either a knife or a razor in amputations. Speaking of the arm of a soldier at the battle of Worcester, he says:—"I would have cut it off instantly with a razour, for the bone being shattered there needed no saw."* Wiseman was the Sydenham of surgery; his works are still of great value.

The state of *Pharmacy* is displayed in the various manuals used during this period; among which may be mentioned *Serapion* and *Mesue de Simplicibus*, the *Nicolaus Magnus* and *Nicolaus Parvus*, the *Lumen Apothecariorum*, the first Pharmacopœia published by authority at Nuremburg (1542), and several Italian compilations. The London Pharmacopœia (1618) fixed the composition, and the proportion of the various compounds prescribed in this country. The College of Physicians had too much modesty to claim the merit of originating a production so felicitous—*ejus caput altius, ejus divinior origo; a Jove principium*—it sprang from the head of their king!† Notwithstanding the merits and advantages of the national Pharmacopœia, it must be confessed that it retained many strange ingredients, as well as some unreasonable compounds; a great multitude of spices are enumerated, but in singular contrast stand foxes, vipers, moles, scorpions, swallows, ants, earth-worms, millipedes; triquetral bones, stercus humanum, lupinum, murium, ovillum, caprinum, columbinum, equinum, gallinaceum, hirundinum, vaccinum, caninum sive album græcum; swallows' nests; the blood of bats; frogs' spawn;—testes galli; virga cervina, taurina; urina hominis, apri, capri, canis, tauri; and gold and precious stones. These simples were variously combined; the *Diascordium*, *Mithridatum*, and *Theriac*, contained from twenty to a hundred ingredients in scientific mixture.

It was a matter of great importance to the community that these drugs should be pure and genuine; accordingly, in the statutes (32 Hen. VIII., &c.) there are express clauses authorising four persons of the College of Physicians, with a warden of the mystery of Apothecaries, to enter the shops, and to submit all the wares to a severe scrutiny. This was very solemnly and satisfactorily performed; but no chemical tests existed; and although the separate substances may have been readily recognised by the senses, it is doubtful whether the most delicate organs could have detected an error in the proportions. James's Pharmacopœia remained almost unaltered until the beginning of the eighteenth century; but some of the articles were probably omitted in practice. Mayerne and others, however diffusive in composition, could never have prescribed *all* of them to the Nell Gwynnes, the Portsmouths, and the Clevelands of the day.

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* Several Chirurgical Treatises by R. Wiseman, serjeant-chirurgeon, 1676.

† Dedication to James I., Ph. Lon. 1618.

The accessions made by the materia medica in this period were numerous. The chemists discovered new preparations. Direct commerce with the East Indies brought many scarce articles into the English drug market. America yielded several invaluable remedies. Guaiacum was introduced into Europe, A.D., 1509; sarsaparilla, 1530; sassafras, 1580. Peruvian bark cured a tertian in the Countess of Cinchona, vicereine of Peru, A.D., 1638. It found its way into England before 1654; but the proper mode of administering the remedy was first proclaimed by Robert Talbor, an apothecary's assistant, probably a subsizer of St. John's College, Cambridge, and certainly a clever charlatan. His practice was brilliantly successful in Paris; the Dauphin was placed under his care, to the great mortification of the court physicians; and the king purchased the secret of his preparation of bark for 2000 louis d'or, and 2000 francs a year for life. It is said that he combined bark with opium. The Jesuits' bark effectually contributed to the reformation of physic. Tartar emetic was discovered by Mynsicht, (1631); the properties of ipecacuanha were made generally known by Helvetius, in the year 1686; all these remedies were for many years excluded from the college pharmacopœias.

Greek medical works were translated in the 16th century into Latin; and nearly all the physical publications of the 18th century appeared in the latter language. The surgeons and the apothecaries wrote in English. Examples of the Latin and English style will be found in various parts of this article, as I have endeavoured to state facts in the language of the contemporary writers, where this was compatible with the course of the narrative. The following specimen of elegant adulation, and of Linacre's latinity, is from his dedication of Galen de *Sanitate tuenda* to Henry VIII.*

"Cum multi tibi quotidie Henrice regum clarissimè splendore, gloriaque nominis tui allecti, multa, quæ te variè oblectent, certatim afferant; alius generosos equos, alius insignes canes, alius aurum argentumve, sed quorum ingenii cujuspiam opus materiam superet: ego cum ejusmodi facultatibus minimè abundem, nihil vel officio meo, vel professione dignius inveni, quam ut tibi studiorum meorum monumentum aliquod dicarem, quo fieret ut simul otii, quod per indulgentiam à justo tibi ministerio aliquando suffuror, ratio tibi constet; simul intelligas me non modò horis iis, quibus te presens fruor, sed etiam reliqui omnibus id pro viribus moliri, quod tibi aliquando gratum fore existimem."

None of the subsequent writers, except Caius, approached the Latin of the English translator. As has been seen, early translations were made from the Latin into the Anglo-Saxon; and John Halle tells the College of Surgeons, (1565,) that the *Chirurgia parva* of Lanfranc had been translated about 200 years before into Saxon-English.† Andrew Borde, or after his own fashion, *Andreas Perforatus*, wrote the Breviarie of Health in English, 1547. A passage in a small work by

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* A. D. 1517.

† *Chirurgia parva*, corrected by Hall, 1565.

Caius is curious, as expressing his reasons for not writing in English.*

"Sence that time," says the doctor, "diverse other thynges I have written, but with entente never more to write in the Englishe tongue, partly because the commoditie of that which is so written passeth not the compasse of Englande, but remaineth enclosed within the seas, and partly because I thought that labour so taken should be halfe loste among them which sette not by learnyng. Thirdly, for that I thought it beste to avoide the judgment of the multitude, from whome, in maters of learnyng, a man shall be forced to dissent in disproving that which they most approve—and approving that whiche they most disallowe. Fourthly, for that the common settyng furthe and printing of every foolishe thyng in Englishe, both of phisicke unperfectly, and other matters indiscreetly, diminishe the grace of thynges learned set furth in the same. But chiefly, because I wolde geve none example or comforte to my countrie men (whom I wolde to be now, as here tofore they have bene, comparable in learnyng to men of other countries) to stonde onely in the Englishe tongue, but to leave the simplicitie of the same, and to procede further in many and diverse knowleges, both in tongues and sciences, at home and in universities, to the adournyng of the common welthe, better service of their kyng, and great pleasure and commoditie of theire owne selves, to what kinde of life so ever they shold applie them," (pp. 4, 5.)

However classical his Latin may have been, in English prose Caius fell far short of Bulleyne, when he discourses in the *Dialogue* of the Plague, how "wittie Chaucer satt in a chaire of gold covered with roses, writing prose and rime, accompanied with the spirits of many kynges, knightes, and fair ladies." Sir Thomas Elyot defends the practice of writing upon physic in English.

"If phisitians be angry that I have written phisike in Englishe, let them remembre that the Greeks wrote in Greek, the Romans in Latyne, Avicenna in Arabike, which were their own proper and maternal tongues; * * but, although they were Painimes and Jewes, in this part of charitye they farre surmounted us Christianes, that they would not have so necessary a knowledge as phisicke is, to be hyd from them which would be studious about it."† Gale, Woodall, and Wiseman, addressed surgeons in their native tongue, but the publication of their works in English met with considerable opposition; the narrow-minded were scandalized at the revelation of the mysteries of the trade, and the selfish absurdly fancied that it might interfere with their profits. "The last, and very worst of all sorts," exclaims Clowes, "are those that with open mouth stand upon their tiptoe, saying, with many puissant and forcible reasons, away with all these books and bookmen, for they have made our arte too common!"‡

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* A Boke, or Counseill against the disease commonly called the Sweate, or Sweatyng Sycknesse, made by John Caius, doctour in phisicke, 1552.

† The Castel of Helth corrected, and in some places augmented, by the fyrste author thereof, Syr Thomas Elyot, knyght, A.D., 1541.

‡ Approved Practise for all young Chirurgeons, by W. Clowes, Master in Chirurgerie, 1688.

Scientific works had unquestionably a better chance of a European circulation in Latin than in English; and all the readers and libraries in Europe scarcely took copies enough to remunerate the Caxtons of the 16th century. But patriotism sought to create native readers, and could not address the people on subjects of vital interest in a cold, foreign tongue; the language born with the thought was banished from religion by the Roman church, under the colour of Cosmopolitanism; and physicians, like the priests, concealed their Scriptures from the people. They had their mysteries and their "foolish things" hallowed by a dead language. But why, Caius and his Latin followers may have been asked, do you not abandon the foolish things in your theories and your prescriptions, so repugnant to the common sense of Englishmen? and, if you dissent from the judgment of the multitude, why not convince the multitude of error? No; Latin is your costume; you are in dread lest your art should become too common. You have something to conceal from mankind, and have not faith in your own rectitude. Printing was discovered in 1540, and began to be applied extensively in the 16th century, but it could contribute little to the popular diffusion of medical science so long as the Latin language was employed. How much would the medical practitioners now scattered all over the country read, if no English journals existed, and all the books were in Latin? Who can tell the influence which the translations of the Bible had upon the English mind? What would have been the result of similar translations of Hippocrates? If Sydenham had published his works in English, he would have set a noble example, that would have been its own reward; for it would have rendered him less likely to confound the envious murmurs of a Faculty with the voice of mankind. Translations of several important works existed at the beginning of the 18th century. A rapid survey of the progress of medicine, then, leads to the result that innumerable new facts and new principles were established in medical science; but that they were never successfully applied in the treatment of disease, or made popular before the close of the 17th century.

The superstitious treatment of the sick began in the remotest antiquity; it attained its maximum in the Norman period, and only disappeared before the dawn of scientific practice. The Saxons had charms, spells, and talismans: they dreaded witchcraft, and quailed under the evil eye. Prayer, anointing with oil, and the imposition of hands, were introduced by the Roman missionaries; the Christians resorted to the shrines of saints, as the heathen frequented the temples of Æsculapius. A similar practice was adopted, and similar cures were performed. A considerable proportion of the early English History is taken up with miracles, and nearly all the miracles are of a therapeutical nature. Oswald (A. D. 648,) shone, as Bede tells in his history of England, by miracles of virtue after his death; upon the spot where he fell fighting for his country against the pagans, the recoveries of the sick—*et hominum et equorum*—did not cease to be celebrated.* Dunstan, and other talented monks, carried the practice further. They embalmed the bodies of their great men; the tomb was opened after the lapse of a few years; the corpse was found in good preservation; the pure body was declared incorruptible, the odour of sanctity pervaded its imperishable fibres. Legends were written, and the people flocked to the shrine in search of relief from their ailments; cures were recorded, and a report was forwarded to the Pope, claiming the saint's canonization. The halo of divinity rested upon the bones, and clung even to the ashes.* It must be admitted that the worship of these saints was often the adoration of great men; and who could deny the virtue of immortal memories? All the large ecclesiastical establishments had saints, and all the saints worked miracles. It was natural that Canterbury should excel the monasteries and the other cathedrals. Thomas Becket, the first Saxon archbishop, who withstood the Norman Henry, and fell under the hands of assassins, was the great Saxon saint. He was murdered between the Christmas and New-year's-day 1170, and buried east of the undercroft. About Easter, Gervase relates that the blessed martyr, by way of prelude, displayed his virtue, and performed certain minor miracles. First at his tomb, then in the church, and at last all over England, whoever called upon his name was cured, whatever the disease might be, under which he laboured. *Quibusdam etiam genitalibus abscisis et oculis effossis nova membra restituit, aliisque morte jam deposita vitam redonavit.* In Christchurch, Canterbury, two volumes of these unequivocal miracles were preserved.† St. Thomas was canonized by Pope Alexander III., March 13, 1172, because in all England the virtue of his miracles was redolent. Under the primacy of Langton, St. Thomas was translated, and "gloriously enshrined." The archbishop provided forage, and the pipes and conduits ran with wine. It was the first jubilee (1220). In spring and summer thousands resorted to Canterbury; the love of travelling, and society; the splendour of the cathedral, and spiritual indulgences, enhanced the attractions. In spring, Chaucer sings:—

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* Hist. Ang. p. 112.

> "Than longen folk to gon on pilgrimages,
> And palmeres for to seken strange londes;
> And specially, from every shire's ende
> Of Englelond, to Canterbury they wende,
> The holy blisful martyr for to seek,
> That hem hath holpen, when that they were seke."‡

A great fair was held at Canterbury, on July 7th, and the jubilee was celebrated in July, August, and September, every fifty years. In this season 100,000 persons assembled. The only road for people north of the Thames, passed near "St. Thomas's Spitil;" and there the poor pilgrim lodged, or was provided for in case of sickness. The *Taberde Inne*, Southwark, was the lodging-house of the higher class of Canterbury pilgrims. The *bordelli* of the bishop of Winchester were in the vicinity; and there is reason to fear, from the Canterbury Tales, that as much sin was committed as expiated at these *Holy Fairs.*

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* Acta Sanctorum; Alban Butler's Lives of the Saints; Matthew Paris, and all the early chroniclers.

† Hist. Ang. Script. x. p. 1417.

‡ Chaucer. Prologue to Canterbury Tales.

Several holy wells were also the scenes of miraculous cures. St. Winifred's well in Flintshire was much celebrated; it engaged the pen of Bishop Fleetwood; and Dr. Milner, so late as 1806, published the miraculous cure of Winifred White, unquestionably one of the best authenticated medical miracles on record.* This spring rushes like a river from the earth; and in a picturesque spot was well calculated to attract attention. The blind, lepers, and other diseased persons, were restored by drinking the water, or bathing in the holy well. Mothers cast their sickly children into the stream, and took them out whole. Agues and burning fevers were cured. Sir Roger Bodenham had a leprosy in the legs, after a tedious quartan: he applied to several physicians, and at last submitted his case to the College of Physicians, who wrote, that if the course which they prescribed had no effect, there was no cure in nature. He bathed in the miraculous fountain, and became as sound as a child newly born (1606). He and his family in consequence became catholics. St. Winifred was esteemed the author of these miracles; and the powerful monks of Shrewsbury, after much opposition, translated her precious relics, in the year 1137, to that town, where the miracles continued. The Bollandists candidly avow, in the *Acta Sanctorum*, that the lives of the Irish and Welsh saints are downright monstrous (plane portentosæ). The legend of Winifred is not an exception. "In her tender years, Jesus sweetly disposed her, by St. Bueno's discourses, to love his service. She was full of graces. Her stature was well proportioned, her face was matchless, her modesty equalled her beauty. Winifred watched whole nights in the church, either kneeling or prostrate before the altar, where she imagined that she was in the presence-chamber of her immortal spouse. Contemplation raised her admiration; so that to hear Jesus Christ only named, brought tears of joy into her eyes. Cradocus became enamoured of her charms, and attempted to seize her person: she ran towards the church; the prince pursued her hotly, till love grew rage, when he severed the head from her body, and it fell upon the *dry valley*. The spring gushed forth upon the spot. She slowly arose as one awaked from sleep: a streak, like a red thread of silk, was observed upon her neck. Winifred died, abbess of a monastery; and, after violent convulsions, breathed out her soul in a 'pure act of intense love.'"

The principle of the division of labour was applied to the saints. St. Sebastian cured the plague; St. Petronel, fever; St. Macurine, frenzy; St. Maire, the scab; St. Genow, the gout; St. Clare, sore eyes; St. Appolonia, the tooth-ache. So many teeth of St. Appolonia were distributed as amulets against tooth-ache that they filled a tun. Some of the Roods wrought miracles in an extensive way. "Commend me," exclaims Fuller, "to the cross of the Priory of Benedictines at Bromholm, in Norfolk. By this cross, thirty-nine dead men are said to be raised to life, and nineteen men restored to their sight."†

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* The Life and Miracles of St. Winifred, by Dr. Fleetwood, Bishop of St. Asaph. Translation of her Life, by Robertus Salopiensis, by J. F., a Jesuit; and a re-impression, by an unknown person. Life of St. Winifred, in the Cotton Library.

† Church History, 1655, book vi., sec. 5.

The Reformers looked upon the catholic roods, shrines, and wells, as "stocks and blocks of cursed idolatry." The blood of Hales was declared to be duck's blood; the Rood of Grace, an old rotten stock: our Lady of Walsingham was dishonoured; St. Thomas à Becket was pronounced by Henry VIII., the new Defender of the Faith, a stubborn rebel and a traitor. His images were every where dragged down, his pictures razed out of books, his bones burnt to ashes. The jubilee of 1520 was the last. In the mean time, the king seized all the saints' treasures.

The Anglican church gradually relinquished all pretensions to miraculous powers. Bishop Hall (b. 1574) has this passage in his travels: —"Costerus slipped into a choleric invective against our church, which (as he said) could not yield one miracle; and when I answered, *that in our church, we had manifest proofs of the ejection of devils, by fasting and prayer*, he answered, that if it could be proved that ever any devil was dispossessed in our church, he would quit his religion."* Barrow (1630—77) says that miracles are unnecessary now, but that they may be performed for the conversion of the heathen. "The church of Rome," observes Tillotson, "would bear us in hand that this miraculous power does still continue in their church. * * But we pretend to no such power, nor have we any reason to do so."† Warburton finally asserts, "We Protestants urge the testimony of the Gospel to prove the truth of demoniacal possessions, the Papists bring their demoniacs to prove the truth of the Gospel, or rather of their church."‡

The king wrought miracles as well as the church. The royal touch was an infallible cure for scrofula. This practice is carried as far back as Edward the Confessor, who dealt, as we have seen, a little in surgery. Sir John Fortescue§ denied the virtue to queens, but Elizabeth "thought herself so much a king, that among other regal functions she frequently exercised this." Gold or silver, touched by the anointed hands, and made into rings, cured epilepsy. All the court physicians, down to Wiseman, bore testimony to the efficacy of the royal specific. The Colleges proceeded against James Leverett, the seventh son of a seventh son, who cured all manner of diseases, especially the king's evil, by stroking with his hand, without the using of any medicines, internal or external.|| "And," exclaimed the honest prosecutors, "he adds scorn and contempt towards those whom the *sacred hand* of his majesty hath touched for the evil" (1637)! || The miraculous touch was considered a test of sovereignty, and the monarch was afraid of removing the mask, and giving up the evident imposition. So much less dangerous is it to deceive than to undeceive a people! The latter task is rarely attempted by statesmen.

Men had looked for life from the dead, the touch of the living, the stars, and the elixirs of alchemy; nor had they neglected the agency

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* Life of Bishop Hall. Wordsworth's Ecclesiastical Biography.

† Sermons, vol. iv., p. 376.

‡ Sermon on the Fall of Satan.

§ Defence of the Title of House of Lancaster.

|| Goodal. History of the College of Physicians.

of good and bad angels. Robert Fludd, or de Fluctibus, as he was pleased to translate himself, at the head of the Rose Cross Society, invented a wild Theosophy, and endeavoured to reduce all the dreams of superstition to a system. The theory I will not enter into, the practice was this:—"The physician," he said, "should believe in the light of the Lord, and pray without ceasing, until the logos, light, wisdom, were shed abroad in his heart; when he would enjoy inalterable health, and be able to cure those who lay in darkness and the shadow of death." Prayers alone cured diseases; and he gave forms of prayer for different cases. This mad wave of a mad sea, was a fellow of the College of Physicians.

In the age of miraculous cures the common people—nine-tenths of the nation—were entirely destitute of medical advice; the miraculous pretensions of the church, and superstition, soothed the mind, excited hope, and sometimes cured disease by exalting the imagination. They filled up the vacuity of despair, and tranquillised the restlessness of suffering. But to prove that error and falsehood are always dangerous, we find in the fifteenth and sixteenth centuries the belief in miraculous powers, and supernatural agency, leading to dreadful results. Thousands were put to death under accusations of witchcraft, all over Europe. Two papal legates executed 6500 inhabitants of the Electorate of Treves, under accusations of witchcraft. The devil had a great deal to do. A hundred and fifty individuals in Friedberg were said to be possessed of devils. The reformers promoted the error. Luther ascribed nearly all diseases to satan. The clouds of superstition began to roll away; and at the end of the seventeenth century, when science shed some rays of light, the horizon was almost clear.

The Municipal Corporations, which have been recently re-constructed, furnished the models of the charters to particular trades' companies. They were granted in the same age. "The greater number of the governing charters of corporations was granted between the reigns of Henry VIII. and the Revolution; the general characteristic of these documents is, that they were calculated to take away power from the community, and to render the governing class independent of the burgesses. Almost all the councils named in the charters are established on the principles of self-election."* The exchequer was at a low ebb, and the sale of chartered monopolies was a frequent financial resource.

The companies pretended to regulate the supply of commodities, and predetermined the mode of the supply. The Shoemakers' Company allowed only a given number of shoemakers to a town; and so solicitous was the company for the public weal, that it admitted no apprentice to the mastership until he had undergone an examination, and made his *master-piece.* The sole of no stranger's foot was permitted to fall within the liberties; and an innovation in bristles, wax, last, or leather—anything in the questionable shape of an improvement—was out of the question. Woodal has left an interesting account of the Surgeons'

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* Report from Commissioners on Corporations, in England and Wales. Parl. Papers, 1835, vol. 23, p. 17.

Company in Hamburgh, one of the Hans Towns, where the trading spirit carried the principle of monopoly to perfection. It is a good specimen of the barbarous system which pervaded Europe. "Only *a certain number of surgeons is allowed in each city, town corporate, &c.* * * as if the city of Hamburgh hath twelve chirurgeons belonging thereto, although 1000 persons should be tending in any way to produce a freedom for a *thirteenth*, it could not prevail, * * as likewise it is so all over Germany; and each chirurgeon is bred, and must be a barber, and so are all barber-chirurgeons.

"The candidate having made his master-piece, and performed some manual exercise, usual with them in his art, had to give a testimony of his skill; as namely, either by grinding and setting a delicate lancet, and therewith opening several veins smoothly, for the *more manifest effecting whereof to the brethren of his calling one will lend him his veine, namely one on the thumb, one on the foot, and one on the arme, one other on the forehead;* so also by the neat and exact making an artificial unguent, or the like: which done, being by the rest of the masters of the citie approved of, and some other rites and ceremonies answering to his calling by him performed, he is then, being esteemed a regular person, and *also having made the brotherwood of the place and himself well drunk once, twice, or thrice, he is I say, ipso facto, admitted to be a brother*, and freely to use his function, and is styled by the name and honour of a master of his profession."*

When the grocers and all the trades in the kingdom had charters, it may seem surprising that physicians were never incorporated until the 10 Hen. VIII. But the surprise will cease when it is recollected that physicians belonged to the catholic church down to this period, both as members of the universities, (of which the pope was the head,) and as holders of benefices. Besides which their numbers were inconsiderable.

The following draft of an act of Parliament, 9 Hen. V. (1422) has been preserved—"No one shall use the mysterie of fysyk, unless he hath studied it in some university, and is at least a bachelor in that science. The sheriff shall inquire whether any one practises in his county contrary to this regulation; and if any one so practise, he shall forfeit 40*l.*, and be imprisoned. And any woman who shall practise fysyk, shall incur the same penalty."† It is not known whether this laconic statute had the force of a law. It was certainly inoperative. In 1511 the Legislature declared that physic was exercised by a multitude of ignorant persons—smiths, weavers, and women—who undertook great cures by the use of sorcery, and noxious medicines, to the displeasure of God, infamy of the faculty, and destruction of the people, particularly of such as could not discern the cunning from the uncunning. It was therefore enacted that, no person, within the city of London, or seven miles of the same, should practise as a physician or a surgeon, unless he had been first examined, approved, and admitted by the Bishop of London, or by the Dean of St. Paul's—*calling to him four doctors of physic, and for surgery, other expert persons in that faculty.* No person to practise in any diocese out of the City, unless he had been examined by the Bishop—*calling to him such expert persons in the said, as he deemed convenient.* Penalty for practising without a licence 5*l.* a month. The examination was conducted by physicians and surgeons. The Bishop, who, as we have seen, had a tincture of physical science, presided. The Act did not interfere with the Universities. Any person who proved qualified was licensed. Some writers have expressed a different opinion; but the Act, when well considered, will be found much less reprehensible than the 14 and 15 Henry VIII. c. 5. anno 1522. This act recites a charter granted, 10 Henry VIII. to John Chambre, Thomas Linacre, Ferdinandus de Victoria, the King's physicians; and Nicholas Halsewell, John Frances, and Robert Yaxley; *and all other men of the same faculty within the city of London, and seven miles about:—omnesque homines ejusdem facultatis de et in civitate prædicta sint in re et nomine unum corpus et communitas perpetua.* The king thought it a duty of his regal office to consult in every way the happiness of the inhabitants of his realm; and therefore to repress the audacity of the wretches who practised medicine from avarice, rather than a good conscience; whence many disadvantages arose to the rude and credulous people. He instituted the College to repress, in the name of public utility, the ignorance and audacity of the evil-doers, by the example of its associates, by the laws, and by its regulations. The college thus constituted of all the physicians in London, had to elect a president annually. The charter gave a common seal, the right to sue and be sued, &c.; and power to hold lands and tenements not exceeding 12*l.* in annual value. No one was to practise in London, nor within seven miles round, unless he had been admitted by the College. This clause clearly gave the College a monopoly; as it enabled it to restrict the number of licensed practitioners. The president and College were to elect four persons annually to have the supervision of all practitioners, and all medicines—*et earum reception' per dictos medicos*—their decision to be enforced by fines and imprisonment.

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* Woodal's works, 3rd edition, 1639, p. 233.

† Wilcock, Appendix, p. 3.

Before the charter was brought to the Parliament, the usual characteristics of the old corporate system betrayed themselves; the six physicians desired to turn the College to account, and usurped the presidency. They prayed no more that the *College* might elect the president annually, but that the *six* may choose *two more* of the commonalty, to be thenceforward called and cleped *elects:* the elects to choose one of themselves annually to be president, and, in the event of death, the survivors to admit a new elect from among the most cunning and expert men of the faculty in London. The new elect to be strictly examined.

No person was henceforth to be suffered to practise physic, through England, until he had been examined by the president and three elects, except he were a graduate of Oxford or Cambridge, who had accomplished all things for his form without any grace.

The 32 Henry VIII. c. 40, (anno 1540,) exempted the fellows from keeping watch and ward, from the office of constable, and any other office of the city; as they had been before exempted from the office of jurymen. It gave the right of searching apothecaries' shops, and of destroying bad drugs.

The act 14 and 15 Henry VIII. had not the customary *Le Roy le veut* attached to it, and the Chief Justice St. John would not admit the patent as a record.* This was alleged in a trial 33 Car. II.; and, moreover, that Wolsey had received a great sum of money to foist it in among others.† The act, however foisted upon Henry VIII., was confirmed by 1 Mary, sess. 2, c. 9, anno 1553; which also enjoined jailers of all prisons, except the Tower, to receive transgressors committed by the College, and to keep them at the prisoners' charge. Magistrates and all officers of justice were commanded to aid the president of the College in the discharge of his duties.

All the licentiates of the College entered the College; they elected the four persons afterwards called censors, who exercised the powers and asserted the privileges of the whole body. The elects only chose the president. In Goddard's case, (1660), Wilde argued for the College, that, by the act of Parliament, 14 Henry VIII., there were none but president, elects, and censors; that all the commonalty were *socii;* and that the thirty then chosen were called *socii* by the bye-law, not by the act of Parliament. On this ground the College gained the trial.‡ In the first Pharmacopœia, (1618,) there is a list headed: *Nomina D.D. Collegarum Societatis Medicorum Londinensum, hodie viventium.* H. Atkins, M.D., is president; he is also called physician in ordinary to the king. Theodorus de Mayerne, M.D., regiarum majestatum medicus primarius, is followed by W. Paddy, J. Craig, regii medici ordinarii, and thirty other names without any further distinction. In the third edition, (1627,) the names are the same as in the first edition; but the seven first are denominated seven of the eight elects. In the fifth edition, (1638,) the orthography of the names only is altered. Harvey is called *medicus regius juratus:* J. Craig, junior, is *archiater* to Prince Charles. In 1651, the list was revised; after the lapse of thirty-three years seven of the thirty-four remained. The list comprised forty-six names, nine of whom were called *candidates*, including Scarborough, Warton, and S. Collins. In 1662, the names remain literally as in 1651, not having been corrected in the interval. George Ent was president in 1677 and 1678, when 54 *names of the fellows* (*sociorum*) *of the Royal College* are enumerated in the Pharmacopœia; and 12 candidates, 15 honorary fellows, and 10 licentiates (permissi.)

In Dr. Fothergill's case, (1770,) the College of Physicians asserted that, so early as 1555, the faculty was divided by a bye-law into three classes—fellows, candidates, and licentiates, the latter class not being of the commonalty. But it was admitted that the bye-law did not exist in writing; and it is certain that the distinction was not recognized in the Pharmacopœia of 1662. So early as 1552, however, practitioners in the country were examined and *licensed* by the president and three elects; and this probably suggested the application of the principle to London. The founders of the College practised physic, surgery, and pharmacy; they prepared medicines, notwithstanding the existence of the grocers; and the 32 Henry VIII. c. 4, § 3, declared surgery a part of physic, and sanctioned its practice by the fellows; it is therefore evident that they were, in the strict sense of the word, *General Practitioners*. They were not consulting physicians; they recognized no right in the apothecary to practise; he was in their eyes a mere druggist; the physician conducted the treatment of the case from the beginning to the termination. The new company first aimed at limiting the number of practitioners. A bye-law fixed the number of licensed fellows in London to 20;* public opinion drove the College to extend the number, and thus defeated to a certain extent the attempted monopoly, which, by making medical advice scarce and almost inaccessible, secured the corporators, however slender their qualifications, high fees and an extensive practice. The heads of the College resolved to retain the government, at least, in the hands of a small number. A bye-law limited the number of members, who sat *in comitiis*, to 30;† a charter (1633) extended the number to 40. This charter named 40 fellows and 10 elects: the place of the fellows, like that of the elects, was to be filled up by self-election from "the commonalty or members of the College." This corrupt charter vested all the power in the forty fellows. Charles II. expressed his readiness to give his royal assent to any bill based upon the principles of the charter; and the College made a grand attempt to pass a bill which they had prepared; but, in the words of Mr. Huybert, "a Parliamentary Committee dismissed the College-men as *re infecta*, and they returned home with a flea in the ear." This did not prevent them from acting, to a certain extent, on the principles of the charter. The commonalty became merely *permissi*—licentiates.

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* Huybert on the College of Physicians, 1675, p. 7.

† Wilcock, Appendix, p. 111.

‡ Wilcock, Appendix, 37, 38.

Goodal,‡ after stating that none was admitted a candidate until he had practised physic four years, gives from the bye-laws the alleged "reason of not receiving the licentiates into the government of the College." "It is because many practise physick in this city, whome we think altogether unfit (inidoneos omnino) to be admitted into the number of fellows or candidates, as being not Englishmen by birth, or not having taken the degree of doctor, or not sufficiently learned, or not of a competent age of gravity, or for other such like causes; yet seeing they may be serviceable to the commonwealth, and procure the health of men, **at least in some cures**§ we do therefore ordain, that after due examination and approbation of the president and censors, they be permitted to practise (permittantur ad praxin.") The examinations were three, and "much of the same nature" with those of the candidates; the first turned on anatomy and physiology; the second on pathology; the third on the method of cure.

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* Lord Mansfield, in Askew's case, Wilcock, Ap. p. 50.

† Goddard's case, Wilcock, Ap. p. 37.

‡ The College of Physicians vindicated by C. Goodall, doctor of physick, an. 1676.

§ The typographical device belongs to the vindicator of the College.

Upon turning to the list of the College, I find at its head George Ent, who gained a colour of celebrity by defending Harvey's doctrines; and among "the *most cunning* and expert men in London, cleped elects," the distinguished Glisson, and the obscure Stone, Frazier, Micklethwayte, Paget, Cox, Whistler, Scarborough, and King. In the midst of ten licentiates, crowded at the bottom of the page in the Pharmacopœia, there is one declared totally unfit to be a fellow, and only serviceable in *some cures*, yet an Englishman by birth, a Fellow of Oxford, and a Graduate of Cambridge,—one sufficiently learned, and of competent age and gravity—Sydenham!

It is in the nature of self-elected corporations to be at war with genius; to be influenced by self-interest; to be led away by envy; and to mislead public opinion by disturbing the level which men have a natural tendency to find in society. The system exposed great men to persecution, and at the same time paralysed the exertions of the monopolists; for the George Ents would never waste their energies in observing the phenomena of disease, when riches and intrigue could elevate them to the highest point in public consideration, and place Sydenham in the dust.

The crimes of a corporation must not obliterate the good deeds of its members. The foundation of a building, which served as a library, a lecture-room, a museum, a place of meeting and public resort, must be reckoned foremost among the services rendered by the College. The first meetings (1518) were held at the house of Linacre, called the Stone-house, Knight Rider-street.* The College never founded lectures, but, as has been stated, it erected an anatomical theatre adjoining Linacre's house. About the time of the accession of Charles I., the College removed to a house at the bottom of Amen Corner. The house belonged to the Dean and Chapter of St. Paul's, and was condemned by parliament as part of the church property. It was purchased by Dr. Hamey, and presented afterwards to the College. Harvey erected a museum in 1653. The College voted a statue, to be placed in their hall, in honour of Harvey. The immortal physiologist was thrice happy: he had a statue raised to commemorate his discoveries in his life-time. He lost practice at first by the whisperings of the faculty; but he was now eighty years of age, and had retired from practice—an expedient which medical discoverers, who desire fame from their contemporaries, will do well to imitate. The College, however, in its relations with Harvey, displayed considerable liberality; and is in some degree associated with his glory. It had, probably, not been divided into castes in his time. The College was burnt down in the fire of 1666; and in 1674 a new structure was opened in Warwick-lane. The lectures, the library, and the museum, tended to promote anatomical studies; and must be considered of less equivocal value than the Pharmacopœia, or the advice which the College distributed during the plagues.

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* The Gold-headed Cane, p. 120, understood to have been written by Dr. Macmichael. The facts are apparently derived from the Annals. Why has the College never published its Annals? Is it prudence or modesty which has withheld the acts of the College from the public eye?

The avowed object for which the medical corporations were established was the suppression of uneducated practitioners. The poor, the bondmen, the great mass of the population, trusted to magic, miracles, mountebanks, and ignorant traders. They had nothing else to confide in. The townspeople were now able to pay, and to call in physicians; but from habit, and views of economy, they still resorted, particularly in slight cases, to empirics who eked out a scanty livelihood by dealing in physic. Medical practitioners, now increasing in numbers, attempted to suppress all illicit practice; and the government listened to their plans. In reading the denunciation of ignorant practitioners, whether in the acts of Parliament, or contemporary writers, it must not be imagined that there was any new eruption of quackery in the sixteenth century. The individuals denounced were the established practitioners of the age; and the project for their suppression was the only novelty. The following passage from Caius may be cited to show how extensively physick was practised, and how many ingenious means ignorance had of clothing itself in the garb of knowledge:—"And flee the unlerned as a pestilence in a comune wealth. As simple women, carpenters, pewterers, brasiers, sope-ballsellers, pulters, hostellers, painters, apotecaries, (otherwise than for drogges), avaunters themselves to come from Pole, Constantinople, Italie, Almaine, Spaine, Fraunce, Greece, and Turkie, Inde, Egypt or Jury; from the service of emperors, kings and quienes, promising helpe of all diseases, yea incurable with one or two drinckes, by waters sixe moneths in continualle distillinge, by *aurum potabile*, or quintescence, by drinckes of great and high prices, as though they were made of the sunne, moon, or sterres, by blessinges and blowinges, hipocriticalle prayenges, and foolysh smokynges of shirtes, smockes and kerchieffes, with such others theire phantasies and mockeries, meaninge nothinge else but to abuse your light beliefe, and scorne you behind your backes with their medicines, (so filthie that I am ashamed to name them,) for your single wit and simple belief, in trusting them most which you know not at all, and understand least; like to them whiche thinken faire foules have faire feathers, although they be never so evil favoured and foule: as though there coulde not be so conning an Englishman, as a foolish running stranger, (of others I speake not) or so perfect helth by honest learning, as by deceiptfull ignorance. For in the errour of these unlerned reasteth the losse of youre honeste estimation, diere bloudde, precious spirites, and swiete lyfe, the thyng of most estimation and price in the worlde, next unto the immortal soule."*

Charters and acts of Parliament allowed none to practise physic, who had not been examined; it gave the corporations the power of testing the practitioner's acquirements, and either of licensing him to practise, or of prohibiting him altogether from following the profession. What was the necessary result of these legislative measures? The principle of a test in physic is sound; the monopoly was an abuse. In the first place the medical profession suffered. The charters and acts offered no facilities to medical education; and excluded many from practice by limiting the numbers; whether by exorbitant entrance fees, or by other means, is not now known. They permitted the heads of a monopoly to persecute the promoters of science—to foster the love of lucre and intrigue—to mislead public opinion by placing men of no merit in high places, and men of transcendent merits in the lowest places. Then great numbers of the members were deprived of their natural rights. They were excluded from the government, and from any share in the administration of their own funds. All the eminent physicians in the provincial towns were treated in the same manner—although they included men, like Sir Thomas Browne, of the most conspicuous talent.

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* Caius on the Sweat, fol. 27.

The public were the greatest sufferers. What would be thought of acts of Parliament for suppressing the practice of eating potatoes in Ireland—declaiming in the language of Mr. Cobbett against this article of food—pronouncing wheaten-bread, and roast beef infinitely better—and lodging in the hands of the wheat-growers, and the cattle-breeders, not only the power of casting the cultivator of potatoes into prison, and of examining his qualifications if he desired to grow wheat, but of limiting their own numbers? What would be the effect of an act which gave the proprietors of a railway company, each of whom had *one carriage of his own*, the power of suppressing every mode of travelling—of putting down horses, asses, dogs, carts, gigs, coaches, canals, everything but the railway; and at the same time gave them the power of *admitting other carriages* to run on the train? The acts conferring monopolies in medicine had precisely these characters, and produced the anticipated results. At the time the physicians were prosecuting quacks, and making martyrs of old women, there were twenty members of the College in the London district; in 1618 there were thirty-four. Now the annual deaths within the *bills of mortality alone*, in the years 1629—36, amounted to 15,292; and as there are two years of sickness to one death, this implies the existence of 30,584 constantly sick, and requiring medical attendance. There were 450 deaths to *each member* of the College, and 900 sick who would require visiting every other day on an average. Could the fellow pay 450 visits daily in London? could he examine and prescribe for every patient? At present there are more than 1500 practitioners in the metropolis, besides chemists; and this would give somewhere about one to every twenty-seven annual deaths, and one to fifty-four constantly sick. The barber surgeons were twelve in number;[*] the apothecaries knew less of physic than the druggists of the present day; what resource then had the people in sickness but to resort to quacks and irregular practitioners? And is it not melancholy to reflect that the medical corporations, from mercenary motives, and in the worst spirit of self-elected bodies, exerted all their influence to deprive the people of adequate medical relief? that in this conspiracy against the health of mankind thousands of Englishmen fell victims to plague, and diseases which medical art may have averted, or cured? The people knew their enemies. At the trials of Dr. Barker, Dr. Trigge, and others, "great multitudes were present—they came to testify what benefits they had received from those men—which being done, they had the satisfaction to hoot the collegiates out of the great hall of justice." When in the days of Oliver Cromwell—"from whom the collegemen had gotten such countenance that they arrested Dr. Read"—the Chief Justice St. John declared that he could not admit the College patent as a record—"the vast body of the people there present filled Guildhall with acclamations."*

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[*] 5 Hen. VIII. c. 6.

How much is it to be regretted that the government did not endeavour to suppress quacks by the *substitution* of educated physicians? that a part of the church property, formerly appertaining to physic, was not employed at the Reformation as a bounty upon medical education, in founding lectureships in London, where dissections could have been carried on, and diseases studied in the hospitals? that small salaries were not set apart from the monastic funds for the *partial* support of medical officers all over the country, upon the same principle as the Scotch system of schools? that translations were not made into English, and manuals composed in that language? and that the College of Physicians was not constructed upon liberal principles, including among its fellows all the medical practitioners in the kingdom? *Then* quackery may have been suppressed.

The political events of this period open with the accession of Henry V., (1413,) the victory of Agincourt, (1415,) and the conquest of France—then followed the long civil war of the Roses, (Henry VI., 1422—61,) the reign of Edward IV., (1461-1483,) the assassination of Edward V., the usurpation of Richard III., 1483, and the revolution of Henry VII., 1485. A state of internal peace prevailed in the reigns of Henry VIII., 1509, Edward VI., 1547, Mary, 1553, Elizabeth, 1558, and James, 1603, only disturbed by the Reformation and ferocious religious persecutions. Charles I., 1625, was dethroned by the parliament; the long parliament (1641) was *purged*, and gave place to the ambitious protector Cromwell, 1653. The restoration of Charles II., 1660, exercised its blighting influence until James II., 1685, was driven from the country by the Revolution, 1688, the accession of William of Orange, and the Bill of Rights, the late fruit of the blood of Russell and Sidney. Anne, 1702, reigned to the end of the period.

To mark the violence of the times, the following kings, queens, and royal persons died violent deaths:—Henry VI. was assassinated; his son stabbed at Tewkesbury. Edward V., and his young brother, were put to death in the Tower. Richard III. was killed in battle by his successor, Henry VII. Henry VIII. beheaded his two wives, Anne Bullen and Catharine Howard. Lady Jane Grey was beheaded by Mary; Mary Queen of Scots by Elizabeth; Charles I. by Cromwell and the army. Nine were put to death by monarchs; one by Cromwell's parliament. The people of England never destroyed one of their kings. Richard Cromwell, and James II. were allowed to retire. Human life had grown more sacred.

The compass, the discovery of America by Columbus, (1402,) of the coast of Africa, and the way by water to the East Indies by Vasco da Gama, opened new paths to British enterprise. Commerce increased; the navy began, after the destruction of the invincible Armada, to assert its superiority on the seas. Manufactures flourished; the town populations augmented rapidly in the sixteenth century.

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* A Corner Stone laid towards building of a new college in London, by A. Huyberts, physician, 1675. Goodal wrote an answer to this pamphlet.

As the labouring population, rapidly recovering the losses sustained in the recurring plagues, became numerous, the relative value of labour somewhat diminished; the forced toil of the serfs was worth little more than their maintenance, and their long cries for enfranchisement were heard between the fourteenth and the seventeenth centuries. In a thinly-peopled country, where agriculture and the arts are springing up, labour is dear: the strong make the weak slaves, and obtain their labour for their maintenance; but when slaves demand freedom, and the lord of the soil, or the capitalist, can obtain more labour for less money in wages than he must expend in keeping up a stock of serfs, why should he desire to keep the labourer in thraldom? The Duke of Newcastle would not undertake to maintain all the labourers upon his estates, in exchange for their slavish services; a proprietor in Canada, or New South Wales, would hesitate in rejecting the offer. Wages were relatively higher in the fourteenth century than at present; but are we to conclude with Cobbett, and others, that the mass of the population were in better circumstances? Unquestionably not—there were free labourers, their wages were higher, and for that reason precisely the labouring population remained serfs. They were bondmen; they received no wages; they were dressed in canvass, and lived on any food which the landholders believed would keep them alive.* Their huts had neither windows nor chimneys. Harrison, who wrote in the reign of Elizabeth, says, "*The gentilitie* commonlie provide themselves sufficientlie of wheat for their own tables, whilst their household and *poore neighbours*, in some shires, are inforced to content themselves with rie or barlie; yea, and in time of dearth, manie with bread made either of bran, peasen or otes, or of altogether, and some acorns among. I will not saie that this extremitie is oft so well to be seene in time of plenty as of dearth; but, if I should, I could easilie bring my triall."† Fortescue, in the time of Henry VI., indeed talks of the English people "drinking no water except upon a religious score"—of their feeding on abundance of flesh and fish—of their being clothed in good woollens." His description can only apply to the middle and higher classes; as historians write of the liberties of the Roman and Greek people, when under the republics, the labouring classes, now emphatically called the people, were all slaves.

Caius, in his book on the Sweating Sickness, bids his patient remember "not to go out fastyng." "Yet," he adds, "this is not so to be understood, that in the morninge, we shall streighte as our clothes be on, stuffe our bellies as full as Englishe men, (as the Frenchman saith to our shame.") John Bull was envied by his thin-ribbed neighbours. Caius absurdly maintained that the epidemic did not reach Scotland, or Germany; and that abroad it only attacked Englishmen. "Cause whereof none other there is naturall than the evell diet of these countries, which destroy more meates, and dryenckes withoute all ordre, convenient time, reason, or necessitie, than either Scotland, or all other countries under the sunne." In another part the writer says, "They which had this sweat sore with perill or death, were either *men of wealthe*, ease, and welfare, or of the poorer sorte, such as were idle persons, good aledrinkers, and taverne hunters. *The laborous and thinne dieted people* either had it not, because they eat but little to make the matter; or with no great grefe and danger, because they laboured out much thereof."

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* See pp. 132—3.

† Description of England, p. 168.

Animal food was abundant when compared with wheat, and relatively cheaper than in the present day. Sir Thomas Elyot declared sundry meats at one meal the greatest enemy of health. "What abuse," he exclaims, "is here in this realme in the continual gourmandise, and daily fedinge on sundry meates at one meale, the spirit of gluttony, triumphinge among us in his glaring chariotte called welfare." Hence innumerable statutes had been devised, "although perchance bodily health was not the chief occasion thereof, but rather the vain and sumptuous expenses of the mean people, [the tradespeople in towns.] For the nobility was exempted, and had liberty to abide still in the dungeon, if they would, and to live less while than other men."[*]

Potatoes, various edible vegetables, and fruits, were introduced as part of the daily food; ale was made with hops; tea and coffee and spice began to be used; tobacco, notwithstanding the royal counterblast, was smoked, and alkoholic drinks were distilled and drank. Canary, sack, and various cheap wines were in use.

If any proof were wanted of the miserable supply of food, and the unhealthy dwellings of the common people down to the seventeenth century, it would be found in the numerous famines and plagues which prevailed. These vultures which followed the steps of our forefathers were observed in the years 1407, 1440, 1477, 1485, (sweating sickness,) 1493, 1500, 1506, 1510, 1517, 1528, 1545, 1551, 1557, 1558, 1563, 1569, 1585, (syphilis,) 1592, (plague,) 1593, 1603, 1625, 1636, 1665. The deaths from plague in London, recorded in the five latter years, were 26,000, 36,269, 35,417, 16,400, 68,596; and the deaths from all diseases 41,769, 42,042, 54,265, 23,359, 97,306. The state of the cities, the pavement, the sewers, the dwellings, were improved; but with an increasing population the effect upon public health was not appreciable until the latter end of the seventeenth century. At a moderate calculation the annual mortality in London, in the three last plagues, was 31, 13 and 43 per cent.

This chapter terminates with the extinction of pestilence in England: when physiology had taught many of the laws of existence, when superstition had been partly abandoned, and when practical medicine, in spite of the medical corporations, had made immense progress under the banners of Sydenham.[†] W. F.

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[*] Castel of Helth, p. 44.

[†] The direct causes of the cessation of pestilence, and some matters which may *appear* to be omitted, will be treated of in the two following chapters. The fourth chapter will extend from the time Cheselden lectured at St. Thomas's, to the establishment of the *Lancet;* the fifth will bring this historical sketch down to the present day. The writer will feel obliged by the communication of any historical facts.

STATISTICS OF THE KENT AND CANTERBURY HOSPITAL.

By John M'Divitt, M.D., Physician to the Hospital.

The time, I believe, is fast approaching when our hospitals will become what they ought to be—not merely places of refuge where our sick poor are kindly and skilfully treated (although that undoubtedly ought ever to be reckoned their *primary* use)—but also rich storehouses of authenticated facts, which may serve as materials for forming correct theories of diseases, as well as for ascertaining those general laws which all diseases have a tendency to observe in their progress, duration, and results. The medical officers of our charitable institutions are beginning generally to feel, that while charity demands their first duties, science also, which makes those duties of any worth, has some claim both upon their talents and their time. Favoured in opportunities above many more deserving among their professional brethren, they begin to be sensible that those opportunities ought to be improved to the furtherance and extension of medical knowledge. Nor can any hospital physician or surgeon be exempted from this duty on the score of limited capabilities. There is no one who is not capable of labours similar to those, the results of which it is the chief object of this communication to furnish; and even such a work is not altogether without resulting good. If from each of the hospitals of Great Britain and Ireland, there were published accurate and comprehensive tables, setting forth the number of patients admitted, the average time under treatment, the proportion cured, &c., the comparative prevalence of different diseases, and the total annual expenditure—surely there might be derived from them, both conjointly and by comparison, *data* of immense importance to those engaged in prosecuting the science of statistics.

The last quarter of the last century was marked, in this country, by many and very great internal improvements. The spirit of dissatisfaction which shook so rudely the frame-work of society, and prevailed so generally for evil, was also productive of no inconsiderable good. The rich, while they became themselves sensible of new and artificial wants, were at the same time roused into an active concern for the permanent and natural wants of their poorer neighbours. It was during this period that the Kent and Canterbury Hospital was founded. On the 26th of April, 1793, its wards were first opened for the reception of patients; but its resources could not then be great, for up to the end of that year, only 65 in-patients were admitted. In 1810, the total number of in-patients admitted and discharged, was 299; in 1818, it had risen to 478, being very nearly equal to the return of 1836, although six years before this last period, a wing of considerable size had been added to the building. During the present year, a second wing has been erected, which completes the edifice, and makes it capable of containing altogether between 120 and 130 beds.

When I came to consult the early records of the Hospital, I was surprised, as well as pleased to find them, comparatively speaking, so perfect. They give, with very few exceptions, the name, age, residence, disease (or " distemper" as it is termed in the earlier volumes,) the admission, discharge, and "state when discharged," of every patient. For some years past the practice of recording the names of the diseases has, in a great measure, fallen into disuse,—a circumstance much to be regretted, and which can be obviated only by enjoining strictly the House Surgeon to keep a *General Register* of all the cases admitted, noting, on the discharge of each patient, (together with other particulars,) the nature of the disease, *as ascertained by his own observation*, unless in those cases in which it is expressly stated by the respective Physicians or Surgeons. A rule to this effect was some time since passed by the Governors of our Hospital, but it has not yet been acted on. The purpose here designed might, I think, be tolerably well answered by the following form of Table, which, since my appointment to the Hospital, I have used as a *private* record of my own hospital cases :

TABLE.—No. 1.

No. of Case.	Date when Admitted.	Name.	Age.	Occupation.	Married or Unmarried.	Residence.	Disease.	How long ill before Admission.	Date when Discharged.	In what state Discharged.	Number of Days on Books.

I have two registers of this kind; one for in-patients, and another for out-patients; and I have sometimes thought of keeping the *male* and *female* patients also, of both classes, distinct. It would facilitate the reckoning of the period of residence to have the *admission* and *discharge* columns placed side by side; but this did not occur to me when I formed the plan of my Register.

From the foregoing Table I make out, annually, a table of *general results*, according to the following form. The diseases here mentioned are taken, by way of illustration, from a table of this sort published by me in the *Medico-Chirurgical Review* for January, 1837. and the numbers are correctly copied :—

TABLE OF IN-PATIENTS.—No. 2.

Name of Disease.	Number of Patients affected with	Average Age of same.	Average number of days ill before Admission.	Average number of days in Hospital.	Cured.	Relieved.	Discharged without Benefit.	Died in Hospital.	Date of Death, reckoning from Admission.	Died as Out-Patients.	Known to have Died after Discharge.
		Yrs.							Day		
Remittent Fever.........	7	10	165	42	5	1	...	1	25th.		
Phthisis......................	18	26	171	46	...	11	3	...	...	4	5
Acute Rheumatism.....	8	24	21	26	8						

The proportion of "deaths" among out-patients is always considerably greater than is recorded in the books of the several Hospitals; for of many deaths the medical officers receive no notice, and the patients' names are consequently struck off for "non-attendance." And even among the in-patients, the proportion of deaths is really greater than is usually stated, for many die after having been made out-patients, and several after having been completely discharged, *the progress of their diseases continuing uninterrupted.* In the above Table, therefore, is a column for "Died as O. Patients," and another for "known to have died after discharge." The importance of attention to these points may be illustrated by stating, that while out of 164 in-patients treated by me, only five died in the Hospital; there died "as out-patients" four, and "after discharge," nine, thus raising the mortality from one in 32·8 to one in rather more than nine. I owe it to myself to mention that, of these eighteen fatal cases, nine were cases of phthisis.

The diseases which prevail most in Canterbury and its neighbourhood, are, phthisis, (which appears to me to be attended with fewer acute symptoms than in other less humid localities,) scrofulous affections of the joints, sub-acute gastritis, rheumatism, chlorosis, intermittent fevers and neuralgia, affections of the heart, and dropsies. While examining with care the records of the hospital, I was very much struck with the frequency, as well as fatality, of rheumatism and asthma; but an explanation of this fact readily occurred to me, when I reflected how many different organic diseases formerly were, and, indeed, by routine practitioners, still are, classed under these two accommodating heads. One patient, a boy ten years old, died, as it is stated, of asthma, the disease having really been, as I believe, rheumatic pericarditis. It would be useless to detail further instances of this kind. I may just mention, however, that the organic diseases which would appear to have been most frequently classed under the head of rheumatism, are, synovial inflammation of the joints, periostitis, cellular inflammation, aneurism of the ascending and descending aorta, diseased liver, diseased kidney, &c.

As regards the *in-patients* of the Kent and Canterbury Hospital, the number of medical and surgical cases are pretty nearly equal; the balance being slightly in favour of the medical. But as a great proportion of the surgical cases consists of diseased joints, periostitis, and extensively ulcerated legs, (diseases which do not admit of out-attendance,) the medical *out-patients* are much more numerous than the surgical. Yet the hospital staff, while it numbers four surgeons, reckons only two physicians; nor do the latter find that their duties are over burdensome.

Most of the cases admitted into the hospital are of a chronic nature; but on this point I shall have an opportunity of speaking again, in the explanations to Table A.

Up to the beginning of January, 1837, patients were admitted and discharged only on one day in the week, namely, Friday; but since that period a second day (Tuesday) has been appropriated to those purposes. This alteration has been productive of good in more ways than one. The period of residence in hospital is in many cases lessened by three days, urgent cases are admitted with less delay, and the out-patients, being divided between the two days, are not kept waiting so long for their medicines.

The rules of the hospital enjoin, that on the first Wednesday in every month, the Physicians and Surgeons, respectively, shall consult together on the cases of all patients who shall have been in the house eight weeks or upwards, with a view to determine on the propriety of retaining or dismissing them, "reference being had, in each case, to the probability of a cure, or of very considerable benefit, if the patient be allowed to remain a further reasonable time." It would be well if this opportunity were more generally laid hold of, for consulting also upon the *future treatment* of such cases as are considered proper to be retained in hospital.

No out-patient can remain on the books for a longer period than twelve successive weeks; but he may be re-admitted on a fresh recommendation, if his case require further assistance. Before this restrictive law was passed, it was not unusual for patients to attend *irregularly* for a period of many months; and, in some cases, even for one, two, or three years. It will be seen by a reference to Table A, that in 1824, the *average* attendance of the out-patients was 208 days! In 1836, it was 69 days, being still more than three-fourths of the whole allowable time. Since the passing of the law above alluded to, the attendance has been much more regular; but to secure this, much *habitual* strictness on the part of the medical officers has been necessary.

Of the out-patients under my own care, rather more than two-thirds attend regularly once a-week. Several from the country receive medicines for a fortnight; and some, living at a distance of ten miles or upwards, and labouring under diseases of very long standing, are not required to attend oftener than once in three, or even four weeks. But with these exceptions, I insist, as much as possible, on a strictly regular weekly attendance.

It would add very much to the efficiency of an hospital such as ours, to attach to it a Dispensary, at which patients might be seen *every day;* and, when necessary, visited at their own houses. In a town the size of Canterbury, all this might be done by one medical officer, who must of course be salaried, but need not reside within the hospital. He should be enjoined to keep a general register of all the cases prescribed for at the hospital, as well as of those seen at their own houses. In the former part of this duty he might be assisted by the clerk, who could act as his amanuensis. The out-patients of the hospital would thus merge in those of the dispensary; but instead of dispensing with the attendance of the physicians and surgeons on out-cases, it might be considered part of their duty to continue to attend on their respective days, for the purpose of being consulted in all cases of difficulty. Nor would there, I conceive, be any hardship in making it incumbent on the physicians and surgeons of the hospital, to meet the dispensary surgeon in consultation, at the houses of patients, when the cases were such as might seem to him deserving of so much attention. A book should be kept for the purpose of recording all those consultations.

The great advantage of thus incorporating dispensaries with hospitals is, that together they are maintained at considerably less expense than they can be separately. The machinery necessary for the latter work, with very little addition, would serve for both. There is at present in Canterbury a dispensary, which was established about two years ago, but which, without funds to support it, has languished since the very commencement, and has consequently proved very inefficient. The founders of it committed a capital error in opposing its junction with the hospital.

Having premised these observations, I now subjoin four tables, which are only part of a much larger number devised by me for the purpose of exhibiting a clear and full view of the statistics of our hospital; but the whole of which I have been prevented by circumstances from completing.

TABLE A.—*Showing the number of In and Out Patients, Male and Fema*
number of Cure

IN-PATIENTS.																					
	Admitted.		From Canterbury.		Cured.		Dead.		Made Out-Patients.		Of those made Out-Patients Cured.		Of those made Out-Patients Dead.		Total Cured.		Total Dead.		Average No. of
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
1793	49	16	15	7	22	8	3	1	7	4	1	1	0	0	23	9	3	1	64
1794	51	38	15	17	29	17	5	6	8	8	3	4	0	1	32	21	5	7	59
1795	71	50	31	18	32	17	5	6	22	18	9	11	0	0	41	28	5	6	61
1796	73	53	29	15	27	12	8	1	22	26	10	12	0	3	37	24	8	4	51
1797	80	63	25	28	29	16	6	3	25	24	13	10	2	2	42	26	8	5	47
1798	85	71	29	30	33	35	5	6	27	20	9	9	3	3	42	44	8	9	47
1799	85	88	32	46	38	41	7	12	28	28	17	14	3	3	55	55	10	15	50
1800	102	108	46	46	40	40	16	13	38	43	23	22	8	7	63	62	24	20	49
1801	95	96	31	45	38	41	9	8	40	39	19	17	5	8	57	58	14	16	49
1802	129	92	49	42	63	37	8	12	41	25	17	9	10	6	80	46	18	18	46
1803	141	89	56	49	71	45	11	3	34	25	13	13	7	2	84	58	18	5	48
1804	143	135	73	65	71	65	16	8	35	41	16	25	5	2	87	90	21	10	42
1805	158	122	51	60	78	52	17	8	45	35	20	16	4	2	98	68	21	10	43
1806	147	123	60	56	66	61	13	5	39	41	26	23	6	5	92	84	19	10	39
1807	137	119	51	45	69	67	14	7	30	24	19	8	1	1	88	75	15	8	41
1808	143	149	46	70	45	36	7	7	51	48	26	25	4	7	71	61	11	14	46
1809	151	159	57	71	65	70	13	11	47	47	28	19	4	9	93	89	17	20	44
1810	165	134	50	64	80	58	11	4	46	37	15	17	4	3	95	75	15	7	45
1811	169	138	63	58	74	65	13	14	55	33	37	16	3	0	111	81	16	14	42
1812	188	170	49	78	97	82	13	4	46	55	22	31	2	6	119	113	15	10	37
1813	178	190	57	85	86	97	11	9	50	44	19	18	7	3	105	115	18	12	39
1814	231	188	89	87	120	90	14	7	49	54	26	32	4	4	146	122	18	11	40
1815	231	178	74	87	120	52	14	13	68	65	16	30	9	7	136	82	23	20	43
1816	215	174	66	81	99	72	15	5	52	51	18	19	8	5	117	91	23	10	47
1817	219	196	63	74	109	85	10	13	47	52	16	19	8	7	125	104	18	20	45
1818	278	200	80	70	126	87	14	13	77	51	34	27	2	5	160	114	16	18	44
1819	276	192	95	69	133	84	14	3	66	55	28	19	4	4	161	103	18	7	45
1820	278	190	80	68	115	81	22	11	93	54	41	26	10	6	156	107	32	17	46
1821	258	184	88	71	119	54	12	13	77	74	27	30	4	7	146	84	16	20	49
1822	230	159	61	59	109	56	13	10	73	63	36	20	6	6	145	76	19	16	55
1823	247	176	62	61	92	47	13	8	89	79	37	28	3	1	129	75	16	9	54
1824	194	197	39	52	61	47	12	4	97	112	31	36	3	5	92	83	15	9	50
1825	231	219	51	54	88	76	10	12	60	65	18	17	3	3	106	93	13	15	49
1826	215	157	72	61	94	56	20	11	55	39	17	12	5	4	111	68	25	15	43
1827	181	160	58	62	91	61	14	7	40	33	15	16	3	0	106	77	17	7	49
1828	204	207	65	67	90	72	9	12	42	25	15	9	2	0	105	81	11	12	49
1829	257	187	72	75	124	56	10	8	41	20	9	5	2	1	133	61	12	9	45
1830	194	211	64	80	83	61	11	9	67	5	1	5	1	0	84	66	12	9	51
1831	231	222	60	79	91	67	16	5	47	44	11	9	2	1	102	76	18	6	53
1832	200	205	62	70	65	65	15	5	41	43	2	11	2	1	67	76	17	6	55
1833	226	197	79	88	76	66	14	10	48	35	11	5	0	1	87	71	14	11	54
1834	245	221	103	115	82	68	8	5	39	48	4	8	1	2	86	76	9	7	52
1835	237	264	87	119	93	93	7	2	53	64	13	14	1	1	106	107	8	3	54
1836	250	256	87	109	110	97	16	5	45	63	8	22	3	1	118	119	19	6	58
Total	7868	6743	2572	2753	3443	2555	514	339	2102	1859	796	739	164	145	4239	3294	678	484	

admitted in each year since the first opening of the Hospital; also the Deaths, &c. &c.

OUT-PATIENTS. Admitted.		From Canterbury.		Cured.		Dead.		Made In-Patients.		Average No. of Days on Books	IN AND OUT-PATIENTS. Admitted.		Cured.		Dead.	
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		M.	F.	M.	F.	M	F.
30	12	11	10	7	4	3	0	8	0	79	64	24	30	13	6	1
36	49	21	30	13	22	5	4	7	10	93	72	69	45	43	10	11
66	69	42	35	17	36	1	3	9	8	113	106	93	58	64	6	9
86	88	47	46	23	29	5	1	18	16	96	119	99	60	53	13	5
91	106	46	70	26	35	7	6	18	24	94	128	121	68	61	15	11
90	109	49	61	19	50	15	3	24	22	132	124	138	61	94	23	12
87	88	48	56	21	31	10	7	13	18	126	131	130	76	86	20	22
122	125	53	77	35	38	11	4	23	32	102	163	158	98	100	35	24
138	165	77	108	53	68	8	7	31	36	114	162	186	110	126	22	23
134	123	78	90	42	55	11	5	32	22	98	190	168	122	101	29	23
124	120	78	80	34	49	6	5	28	31	103	203	153	118	107	24	10
184	122	75	109	48	72	5	4	24	38	111	268	178	135	162	26	14
183	182	85	111	60	71	10	12	57	56	98	239	213	158	139	31	22
145	177	97	118	50	80	9	8	21	32	112	229	227	142	164	28	18
172	84	74	88	39	63	7	5	28	29	94	251	150	127	138	22	13
171	200	100	125	76	76	10	6	23	55	105	240	246	147	137	21	20
190	252	102	157	69	96	5	6	55	70	94	239	294	162	185	22	26
164	199	81	136	54	71	4	7	52	52	121	231	244	149	146	19	14
223	210	119	133	75	104	4	2	71	61	93	266	254	186	185	20	16
170	246	82	153	59	84	4	5	53	58	93	259	303	178	197	19	15
176	235	97	164	63	111	7	5	37	60	88	267	321	168	226	25	17
198	272	119	184	73	133	3	1	48	55	109	332	351	219	255	21	12
221	307	98	208	76	155	3	10	69	59	92	315	361	212	237	26	30
255	292	124	194	88	121	4	3	90	94	94	328	321	205	212	27	13
239	273	110	156	72	109	8	10	83	73	104	328	344	197	213	26	30
260	327	119	170	62	128	7	3	74	103	109	387	373	222	242	23	21
239	312	133	160	88	119	2	5	65	94	105	384	355	249	222	20	12
289	406	130	213	76	145	6	12	81	115	126	393	427	232	252	38	29
237	473	135	258	117	187	11	12	64	94	151	354	489	263	271	27	32
266	375	133	203	103	154	9	5	47	72	190	376	399	248	230	28	21
323	458	166	270	118	178	8	12	63	87	193	418	468	247	253	24	21
410	494	154	273	155	198	7	7	87	88	208	420	491	247	281	22	16
202	280	90	157	72	83	10	6	18	32	159	355	402	178	176	23	21
210	299	139	206	52	100	14	6	22	21	77	348	396	163	168	39	21
203	333	121	236	70	107	9	8	18	25	68	326	435	176	184	26	15
204	368	132	239	59	87	14	7	16	54	61	350	496	164	168	25	19
201	244	115	178	45	58	11	5	29	25	60	388	386	178	119	23	14
189	428	114	282	59	93	13	3	19	97	61	297	537	143	159	25	12
246	373	171	278	62	101	6	7	18	36	65	412	515	164	177	24	13
258	390	177	274	44	64	13	8	17	30	69	400	522	111	140	30	14
253	388	167	279	58	83	5	6	15	19	63	416	531	145	154	19	17
215	392	146	298	23	51	6	10	19	55	70	402	510	109	127	15	17
216	441	158	329	55	110	8	2	10	46	52	390	595	161	217	16	5
244	500	160	365	76	165	6	2	28	58	69	421	635	194	284	25	8
360	11386	4573	7367	2586	3974	330	255	1635	2162		12491	14108	6825	7268	1008	739

EXPLANATION OF TABLE A.

This Table is intended to declare,—

1st. The *real* number of patients, in and out, admitted in each yea since the first opening of the hospital.

This could be done only by showing the number of in-patients mad out, and *vice versa,* (both of which are counted twice in the books an reports of the hospital,) and subtracting their joint number from that o the in and out-patients. This is done in the *third* compartment of th Table.

When persons recommended as in-patients cannot be immediatel admitted for want of room, they are in the meantime made out-patients and as the female wards are in general most crowded, this happens mor frequently in the case of females. Hence the larger proportion of femal "out-patients made in-patients."

2nd. The proportion of patients from Canterbury.

It will be seen that this is greater in the case of out than of in-patients; and greater in the females of both than in the males.

3rd. The proportion of cures and deaths.

To ascertain this, it was necessary to make the deductions mentione above, otherwise the number of patients being represented greater tha it really was, (a certain number of them being counted twice,) the proportion both of cures and deaths would appear less than it ought. Th true proportion is seen in the third compartment of the Table.

It ought to be mentioned, that as I have reckoned among the in-patient cures those of in-patients made out; and have not made a corresponding deduction in the out-patients' admission column, the proportio of cures among the out-patients will appear (if this circumstance b overlooked) less than it really was.

An important object answered, by inquiring into the number of in-patients made out, is to ascertain the comparative state of patients se discharged from the different hospitals. One of the governors of ou hospital, whose imperfect knowledge of medical statistics serves n other purpose than to make him represent unfairly the comparative car and skill of its medical officers, surprised us all some time ago by calculating among the "cured" of different hospitals *all those who had bee made out-patients.*

As I have been but a short time attached to the Institution, and my number of cases can constitute but a very insignificant element in any calculations that may be made respecting the general results, I may without fear of appearing boastful, assert, that the medical officers of the Kent and Canterbury Hospital have no reason to dread a comparison of the results of their labours with those of any other medica staff in the kingdom. But I would remind any one who may choose t enter on such a comparison, that he may possibly overrate his own capability for the task, as well as underrate the difficulties incidental to a faithful and just performance of it. I would remind him that he must take into account the comparative severity, danger, and *duration* of the iseases admitted, as well as the physical and moral differences observ- ble in the several localities. After all this has been done, there will yet remain some allowance to be made for the different degrees of strictness vith which different men adhere to the exact meanings of the terms, “Cured,” “Relieved,” &c.

As an illustration of the kind of cases (with reference to the previous uration of illness) admitted into the Kent and Canterbury Hospital, I ubjoin a brief tabular view of 148 out of 164 cases admitted by me as n-patients during the years 1835—36. Of the duration of the remain- ng 16 cases, an account was neglected to be taken. These are the only ases of which I can avail myself for this purpose, as it has not hitherto een the practice to record in the hospital books the time during which atients have been ill previously to their admission.

Of 148 patients, there had been ill previously to admission;

During 13 years.	9 years.	8 years.	7 years.	5 years.	4 years.	3 to 4 years.	2 to 3 years.	1 to 2 years.	6 to 12 months.	3 to 6 months.	1 to 3 months.	Under 1 month.
1	2	1	2	2	1	8	11	22	20	23	36	19

4th. The average number of days under treatment.

The ascertainment of this point was a work of great labour, requiring separate calculation of the actual residence or attendance of every atient both in and out; for the “Annual Reports” (with a few exceptions) were either too confused, too imperfect, or too incorrect, to be f any use. In very many instances, also, the discharge of patients aving been neglected to be recorded in the proper book, and the books f the Medical officers not having been preserved, (they being by a very bsurd rule of the hospital the private property of the several medical fficers,*) it was found necessary to go through the minuted proceedings f many weekly boards, in order to ascertain the discharge of a single atient.

In reckoning the “Cures” and “Deaths” for each year, an account vas taken *of all the cases admitted in that year*, such as remained over ntil the next being followed out, and the manner of their discharge ascertained. The same plan was pursued in reckoning the average duration of treatment, so that on none of these points would the numbers given in the several “Annual Reports” (supposing them always strictly correct,) necessarily correspond with those stated in the Table. There is, however, an accidental correspondence in some of the years.

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* This rule has lately been cancelled, and the Physicians’ and Surgeons’ books are now the property of the Hospital.

TABLE B.—*Table of Ages of all the In-Patients admitted from* 1793 *till* 1838.

Age	0—5		5—10		10—15		15—20		20—25		25—30		30—35		35—40		40—45		45—50		50—55	
Sex	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M	F.	M.	F.	M.	F.	M	F.	M.	F.
Admitted	63	47	410	298	655	590	1034	1746	1070	1224	876	718	764	471	716	441	558	301	566	294	333	181
Cured	19	9	67	22	247	251	480	653	534	542	413	240	359	183	295	140	309	132	197	96	185	74
Dead	7	4	16	16	36	18	45	44	48	44	44	37	51	32	48	29	36	19	47	21	28	15
Cures per cent	30.1	19.1	16.9	30.8	37.8	42.5	46.4	37.4	49.9	44.2	47.1	33.4	46.9	38.9	41.2	31.7	55.3	43.8	34.8	32.6	55.5	40.8
Deaths per cent	11.1	8.5	3.9	5.3	5.4	3.	4.3	2.5	4.4	5.	3.5	5.1	6.6	6.7	6.7	6.5	6.4	6.3	8.3	7.1	8.4	8.2

Age	55—60		60—65		65—70		70—75		75—80		80—85		85—90		90—95		95—100		Of All Ages.	
Sex	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Admitted	350	193	216	112	143	77	58	31	45	14	6	4	1	1	1	—	3	—	7868	6743
Cured	120	41	113	52	48	32	41	7	12	9	4	2	—	—	—	—	—	—	3443	2555
Dead	41	23	24	15	21	12	9	4	9	5	2	1	1	—	—	—	1	—	514	339
Cures per cent	34.2	21.2	52.3	46.4	33.5	41.5	70.6	22.5	26.6	64.2	66.6	50.	—	—	—	—	—	—	—	—
Deaths per cent	11.7	11.9	11.1	13.3	14.6	15.5	15.5	12.9	20.	35.7	33.3	25.	100	—	—	—	33.3	—	—	—

When this Table was completed it was found that its numbers were *greater* than those of Table A; but as the differences between them were inconsiderable, they were *made to agree* by a *proportionate* reduction of its constituent numbers. Those who have had much experience in labours of this kind will not be surprised to hear that often, after calculating three or four separate times the numbers for any particular year, these several calculations were found to differ from each other by one or two, fewer or more. I think it right to state the above-mentioned circumstance, as I would not claim for this Table the character of *complete* accuracy, although it is, I believe, as nearly accurate as may be. It will be seen that the admissions, both of males and females, are most numerous between the ages of 15 and 25. The fact here stated is readily accounted for by the prevalence at this period of life of Scrofula, Rheumatism, Chlorosis, Hysteria, and, but for the low rate of mortality, I would add Phthisis also. *Three* male patients are stated to have been admitted between the ages of 95 and 100; but there was, in fact, only *one* patient of this age; he was re-admitted twice, and ultimately died in the hospital. The mortality was thus really 100 per cent. instead of 33.3, which last number is put down in conformity with the rest of the Table, in which all re-admissions are reckoned as fresh cases.

TABLE C.

General Expenditure of the Kent and Canterbury Hospital, During the Years 1826—1835, showing also the Average Cost of each Patient, as regards Diet, Medicine, &c. &c., &c.

		1.			2.			3.			4.			5.			6.			7.			8.			9.		
YEARS.	Daily Average Number of Patients in Hospital.	Diet Expenditure—Coals, Candles, Soap, &c. &c.			Malt Liquors, (chiefly brewed at Hospital.)			Clerks, Matrons, and Servants' Wages,—Shaving Patients.			Drugs, Phials, Pots, Leather-skins, &c. &c.			Leeches.			Wines.			Spirits.			Surgical Instruments, Bandages, &c.			Medical Salaries, exclusive of Apprentice Fees.		
		£.	s.	d.	£.	s.	d.	£.	s.	d.	£.	s.	d.	£.	s.	d.	£.	s.	d.	£.	s.	d.	£.	s.	d.	£.	s.	d.
1826	44	788	19	1	148	0	6	262	2	7	382	17	11	19	15	0	11	13	0	16	15	0	38	4	7	146	12	0
1827	46	861	14	11	121	16	0	257	14	4	454	15	4	20	6	2	14	14	3	14	3	0	15	13	1	122	10	0
1828	54	920	1	2	131	7	5	282	15	11	377	2	1	26	7	7	17	10	0	18	17	0	35	15	10	140	0	0
1829	54	964	3	6	135	18	8	259	9	7	265	1	6	23	14	10	17	10	0	9	12	0	18	10	11	140	0	0
1830	57	981	8	6	98	5	7½	255	11	3	314	17	8	33	6	8	13	11	3	11	10	0	15	6	7	147	9	6
1831	65	1,072	9	9	145	5	3½	291	8	10	328	16	1	35	10	2	19	0	0	15	7	0	17	0	0	147	10	0
1832	61	972	14	11	119	5	0	264	9	3	303	9	1	26	8	0	19	0	0	9	1	0	3	8	10	135	0	0
1833	53	971	8	3	122	5	1	236	11	8	198	2	7	30	6	0	19	0	0	12	2	0	15	11	3	100	0	0
1834	66	932	18	4	98	13	9	238	3	6	255	12	4	29	0	6	19	0	0	10	12	0	11	8	1	100	0	0
1835	73	959	16	1	118	7	11	256	5	4	247	14	5	37	10	3	24	18	0	6	6	0	7	11	10	100	0	0
Total....	573	9,425	14	6	1,239	5	3	2,604	12	3	3,128	9	0	282	5	2	175	16	6	124	5	0	178	11	0	1,279	1	6
Average.	57·3	942	11	5	123	18	6	260	9	2½	312	16	10¾	28	4	6	17	11	7¾	12	8	6	17	17	1	127	18	1¾

TABLE C.—(*Continued.*)

YEARS.	Daily Average Number of Patients in Hospital.	10. Printing, Stationery, Bibles, Prayer-books, Insurance, Postage, Carriage, &c.	11. Furniture and Repairs, Linen, Woollen, Glass, Earthenware, &c.	12. Total Ordinary Expenditure.	Building and Repairs, Roads, Walks, &c.	Grand Total, Expenditure.	Yearly Average Expense of each Occupied Bed, as per Cols. 1, 2, 3.	Yearly Average Expense of each Occupied Bed, as per Cols. 4, 5, 6, 7, 8, 9.	Yearly Average Expense, &c. as per Col. 12.	Daily Average Expense as per Col. 12.
		£. s. d.	£. s. d.	£. s. d.	£. s. d.	£. s. d.	£. s. d.	£. s. d.	£. s. d.	Pence.
1826	44	58 3 9	73 5 2	1,946 8 7	72 19 4	2,019 7 11	27 5 0	13 19 11	44 4 9	29
1827	46	67 15 0	123 4 4	2,074 6 5	103 7 8	2,177 14 1	26 19 9	13 19 2	45 1 11	29⅝
1828	54	65 15 11	164 14 5	2,180 7 4	257 0 0	2,437 7 4	24 14 2	11 8 0	40 7 6	26½
1829	54	49 13 3	69 18 11	1,953 13 2	1,302 8 5	3,256 1 7	25 3 6	8 15 8	36 3 6	23¾
1830	57	56 1 10	337 19 6	2,265 8 4½	948 10 10	3,213 19 2½	23 8 6	9 8 1	39 14 10	26⅛
1831	65	82 13 1	117 10 10	2,272 11 0½	353 5 11	2,625 16 11½	23 4 4	8 13 3	34 19 3	23
1832	61	103 13 10	175 15 10	2,132 5 9	77 14 0	2,209 19 9	22 4 9	8 2 8	34 19 1	23
1833	53	52 16 10	87 7 4	1,845 11 0	57 10 2	1,903 1 2	25 2 0	7 1 6	34 16 5	22⅞
1834	66	68 19 9½	95 9 5½	1,859 17 9	113 11 0	1,973 8 9	19 4 9	6 8 11	28 3 6	18½
1835	73	50 17 6	76 10 1	1,885 17 5	86 2 9	1,972 0 2	18 5 7	5 16 2	25 16 8	17
Total....	573	656 10 9½	1,321 15 10½	20,416 6 10	3,372 10 1	23,788 16 11	—	—	—	—
Average.	57·3	65 13 1	132 3 7	2,041 12 8	337 5 0	2,378 17 8¼	—	—	—	—

EXPLANATIONS OF, AND COMMENTS ON, TABLE C.

From this Table I have excluded Legacy Duty, and certain law expences, amounting altogether, in the ten years specified, to 361*l.* 19*s.* 9*d.*

In 1826 I find that there was paid to a "man employed in the Dispensary" the sum of 41*l.* 12*s.* 6*d.*, which sum I have included in the medical salaries of that year. This very unnecessary appendage to the medical department was cut off at the close of 1826.

As an instance of the extent to which abuses may come to prevail in public institutions, I may mention, that for five years preceding the date with which this Table commences, the average annual outlay for drugs, wines, spirits, malt liquors, and surgical instruments, amounted to 1108*l.* 11*s.* 1*d.* In one year (1824) the cost of these articles was 1395*l.* 2*s.* 0*d.*!! In the "Annual Report" of 1825 (to reconcile, I suppose, the public to so large an expenditure in the medical department,) the out-patients were returned at 844, the actual number having been only 482. It is but justice to say that the "Reports" of later years have been as scrupulously correct as they are satisfactorily full and explicit.

It behoves, I think, every friend of truth, and every real friend of our public charities, to oppose himself stedfastly to all unfair dealing with the public; which, wrong at all times, is, in the present day, neither politic nor safe. And yet a few years since, when the Rev. Charles Oxenden was engaged in procuring materials for his well-contrived, elaborate, and, in the highest degree, useful "Statistical Table of the Hospitals," he found that at one large provincial Hospital, all the out-patients *dead* were returned as *cured*. His attention was drawn to the point by remarking that, according to their "Annual Reports," *not one of their out-patients had died.* Truly, a public that could take in, and digest this, might be expected to swallow any thing.

But what think you of a similar fraud, although on a minor scale, being *meditated* during the very year in which we now live;* despite, too, of the two numbers of the "Medical Almanack," which, (give me leave to say,) have enlightened the public on the subject of Medical Statistics more than all the works previously published? At the last annual meeting of the Governors of a celebrated charitable establishment, it was actually discussed, whether, in making out their "Report," the true number of Deaths should be stated! It was carried, I am happy to say, in the affirmative; but, even to entertain the question, rendered the parties, in my opinion, deserving of reprehension. The Institution, besides, required no such false support, its own real and acknowledged usefulness making it stand well and safely with the public.

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* This was written in the autumn of last year.

TABLE D.

List of Operations performed at the Kent and Canterbury Hospital, from August 13, 1828, *till October* 1, 1837.

NATURE OF OPERATIONS.		Number of Cases.	Average Age of Patients.	Cured.	Benefited.	Died.	Average rate of Mortality per Cent.	REMARKS.
Amputations.	Larger...	41	33	38	....	3	7·3	Of these, six were accidents; 2 were cases of Senile Mortification; 2 of "diseased femur;" and the remainder of diseased joints. Nine patients were under 20; 1 under 10 yrs. of age.
	Lesser...	4	15	4	....	....	....	The record of these is evidently defective; they must have been more numerous.
Amputation of Penis......		1	63	....	1	....	....	For Fungoid Disease.
Removal of one Testicle..		1	33	1	....	....	....	
Mamma Removed		7	53	7	....	....	....	In one of these cases the mamma was converted into a mass of Hydatids.
Lip Excised		2	53	2	....	....	....	Both these were Males.
Artificial Lip..................		1	16	....	1	....	....	Under lip had been eaten away by *Cancrum Oris*, occurring after Scarlatina, in childhood.
Axillary Artery Tied......		1	13	1	....	....	....	Aneurism of brachial Artery from Puncture.
Femoral Artery Tied......		1	41	1	....	....	....	For popliteal Aneurism. Ligature remained seven weeks.
Lithotomy.....................		15	21	14	....	1	6·6	Seven patients were under 10; four under 20; two under, and two above, 60 years of age.
Strangulated Hernia......		4	58	3	....	1	25·	All the patients were males; the Hernia inguinal in all.
Tumour Removed		8	33	7	1	....	....	Of very few of these is the nature stated.
Cataract Extracted.........		2	70	2	....	....	....	The paucity of Eye operations is remarkable.
Paracentesis Abdominis..		13	50	....	8	5	38·4	Three patients were males affected with Ascites—all died. Among the females, three were cases of Ovarian Dropsy—one died; the rest were cases of symptomatic general Dropsy.
TOTAL...............		101	....	80	11	10	....	My only object in recording Paracentesis among the operations, is to show the great fatality of those diseases in which it is practised.

NOTE BY THE EDITOR.

The extensive series of observations collected by Dr. M'Divitt, establishes the law first laid down by Mr. Edmonds, and confirmed by the cases of small-pox published last year; viz., that the mortality of cases of sickness increases in a regular geometrical progression, and that the rate of increase is very nearly 34 per cent. every 10 years. This is quite apparent when quinquennial periods of life are observed. In the annexed abstract, decennial periods have been taken to render the comparison more evident. The higher mortality in infancy is quite in accordance with the theory; but three rates afford no test of its applicability.

Ages.	Cases.	Deaths.	Deaths in 100 Cases (observed.)	Deaths in 100 Cases (calculated.)
0— 5	110	11	11·0	
5—10	708	32	4·6	
10—20	4025	143	3·5	3·3
20—30	3888	173	4·4	4·4
30—40	2392	160	6.7	6·0
40—50	1719	123	7.5	8·0
50—60	1057	107	10·1	10·8
60—70	548	72	13·1	14·4
70—80	148	27	18·2	19.4
80-100	16	5	30·2	25·8

The cases, as Dr. M'Divitt has shown, are not treated at the Canterbury Infirmary during the whole period of their duration.

But it has been proved that the duration of cases of sickness increases at the same rate as the mortality; and that the *mortality at every age is the same in a unit of sickness*—in *a day* for instance.

As the mortality of the cases in the Canterbury Infirmary increases very nearly 34 per cent. (at least 31 per cent.) every ten years, it follows that the *term of treatment* increases also 34 per cent. every ten years. We hope that Dr. M'Divitt will put this principle to the test, and communicate the results next year.

FACTS ILLUSTRATIVE OF THE PATHOLOGY OF THE HEART.

From the Croonian Lectures for 1838.

BY JOHN CLENDINNING, A.M. AND M.D.[*]

THE object of the researches of the Lecturer was principally the illustration of Pectoral disease, and more especially of disease of the Heart. It had long been held that phthisis was the chief of fatal diseases, but the Lecturer soon found reason to suspect that the heart was at least as liable to original organic changes as the lungs. In the course of his inquiries it appeared further, that disease of the Heart had, in addition to great frequency and fatality, a peculiar interest, on account of the superior extent and variety of its Pathological relations as a cause or effect of other visceral diseases—also, that the distribution of morbus cordis, according to age and sex, was such as to give it paramount importance as compared even with the much dreaded phthisis. For those reasons the especial attention of the Lecturer has been for some years directed to diseases of the heart, for the study of which he has had favourable opportunities as an official practitioner; of the results at which he has arrived some of the most interesting admit readily of numerical illustration, and will therefore find an appropriate place in this article. First, as to the *Frequency of occurrence of Morbus Cordis in daily practice.* The following Table shows the proportion of mortality attributed to morbus cordis out of the whole mortality of 14½ years, ending with 1835, observed at St. Marylebone Infirmary.

Fevers and Exanthemata, 350.	Encephalic Diseases, 480.	Abdominal Diseases, 732.	Old Age and Scrofula together, 99	Remainder, from minor sources of mortality, about 400.

Pectoral Diseases.	Phthisis	991	altogether 2300.
	Asthma, or morb. cord. c. Bronch. chron.	733	
	Morb. cord. and Dropsy together	382	
	Pneumonia and Pleuropneumonia	208	
Grand Total, nearly 4,400.			

From the preceding table it appears that not less than one-fourth of the deaths were attributed to morbus cordis, either by that name or some other well known at the Infirmary, to imply disease of the heart; and from the Lecturer's own personal observations it would appear that the mortality owing immediately or remotely to Cardiac disease has, for some years past, during which, in addition to other means, the balance has been regularly used in post mortem examinations, not been mate-

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Dr. Clendinning has obligingly favoured the Editor with this abstract of his researches for the pages of this publication.

rially less than one-third, or 33 per cent. This appears from the fact that of 520—30 autopsies performed between October, 1835, and May, 1838, between 170 and 180 had morbus cordis, usually simple hypertrophy of the heart.

The preceding figures tend to show that for frequency and fatality morbus cordis is the chief of our diseases, which, in fact, is the general conclusion to which the Lecturer's inquiries have led him. Now, this conclusion is strengthened by several considerations arising out of the facts above summarily stated.

1. From the general summary of mortality for the 14—15 years subsequent to 1821 above given, it appears that of late at least morbus cordis has been more fatal at the St. Marylebone Infirmary than phthisis. The deaths from the latter disease have been, in the period 1821—1835, under 1000, while those from morbus cordis, under one or other form of name, have been at least 1100 and upwards.

2. From the Lecturer's personal observations during about two years and a half, ending May, 1838, the proportion of morbus cordis to phthisis has been 175 : 75 nearly, or 70 and 30 per cent. respectively, and to the whole of the inspections as follows—viz. morbus cordis 33 per cent., phthisis only 14½ per cent.

3. Morbus cordis seems to multiply with years amongst a population, whereas phthisis declines in frequency and importance as life advances, and is become already rare at 45 or 50. The following table shows, in a striking manner, the superior importance of cardiac disease according to the experience of the St. Marylebone Infirmary.

Table showing the ratios per cent. of Morb. Cordis and Phthisis at each of four intervals of age to the whole number of cases examined at each interval of age.

	MALES.		FEMALES.	
	Phthisis.	Morb. Cordis.	Phthisis.	Morb. Cordis.
15—30	0.45	0.21	0.24	0.15
30—50	0.28	0.36	0.17	0.17
50—70	0.20	0.40	0.16	0.29
70-100	0.10	0.42	0.05	0.33

Note.—From the preceding table are excluded all the cases of morbus cordis in which were found unequivocal valvular defects or diseases, amounting together to thirty, and distributed pretty nearly as the others over life above 15,—and further, owing to an oversight in the first abstract, about 25 other cases, mostly of simple hypertrophy in the male sex, have been omitted; of these also, however, the distribution was in no material point different from that of the 118 cases included in the table.

From the preceding Table, it appears that in the adult ages, and especially amongst males, morbus cordis is greatly more fatal than phthisis; or, in other words, that the *hypertrophy with enlargement of the heart and chronic catarrh*, that is best known still perhaps by the name *Asthma*, and which is nearly identical with what in this article is called morbus cordis, is the cause of a much larger share of the general annual mortality than true tubercular consumption; and that the excess on the side of cardiac disease is not less than 50 per cent. And the importance of morbus cordis seems greater still from the circumstance that it occurs twice as often apparently in males as in females; male adults, the "skilled labourers" of society, being its favourite victims.

So much for the frequency and importance of morbus cordis, absolutely, and as compared with phthisis and other diseases.

Another chief point in the Lecturer's inquiries was *to fix by simple means the normal limits of the heart in weight and bulk;* of the heart only in the first instance, but subsequently *those also of the other viscera.* The superior frequency and great importance of simple hypertrophy, exclusively of valvular or pericardial complication being admitted, the necessity is obvious of an accurate knowledge of the dimensions of the organ in different circumstances, and of easy means of testing its condition.

The following Table shows the average absolute weight avoirdupois, of the heart, in each sex, at each interval of age in the normal state. The total of healthy hearts, exclusive of cases of phthisis and morbus cordis, was 156; viz., 58 males, and 98 females. The weight only, it may be premised, is given, as its volume can be deduced at once accurately enough from its weight, assuming, as numerous trials entitle us to do, that the average density of the organ, when not very fat, is about the same as that of the blood; viz., about 1050.

MALES.			FEMALES.	
Age.	No.of Observ.	Average wt.	No.of Observ.	Average wt.
15 — 30	8	8½ oz.	20	8⅐ oz.
30 — 50	16	8½ oz.	28	8⅓ oz.
50 — 70	23	9⅓ oz.	27	8 oz.
70 — 100	11	9¾ oz.	23	8 oz.

Average for life above fifteen, male average, 9oz., female average, 8⅛ oz.

The following Table shows the average relative weight of the heart, according to sex and age in health, as before.

MALES.			FEMALES.	
Age.	N. of Obs.	Rat. of H. to Per.	N. of Obs.	Ratio of H. to Pers.
15 — 30	9	1-164th	17	1-169th
30 — 50	8	1-150th	13	1-161st
50 — 70	18	1-161st	22	1-147th
70 — 100	7	1-155th	6	1-121st

Averages for life above fifteen; Males, 1-158th. Females, 1-149th.

The average absolute weight of each of the viscera of the head and abdomen, and of the lungs, in cases in which the heart agreed pretty nearly in absolute and relative weight, with the preceding averages, was found to be as follows:—

Encephalon..	Brain........ Cerebellum ... Med. Oblong..	Male .. 45½ oz. Female . 42 oz.	For the whole of life above fifteen.
Cerebellum		Male 5½ oz. Female 4½ oz.	Whole of life above puberty, or 15.

	MALES.		FEMALES.		
	No. of Obs.	Av. wt.	No of Obs.	Av. wt.	
Lungs.......	31	46½ oz.	34	35½ oz.	Averages for life above puberty, or 15, and exclusive of phthisis and morbus cordis.
Liver	55	49 oz.	101	44½ oz.	
Spleen.......	50	4¾ oz.	93	4⅓ oz.	
Stomach.....	34	4½ oz.	51	4⅗ oz.	
Pancreas	51	2¼ oz.	84	2¼ oz.	
Kidneys......	55	8⅓ oz.	98	8 oz.	

Besides life averages, averages were also taken for each of four intervals of age above 15; and in the latter the peculiarity of the law of nutrition in the heart was strikingly illustrated, since in the case of every single abdominal and cranial organ there was found a well marked diminution in weight, progressive from maturity to age, and well marked in each sex, but especially in the female sex: and the lungs were the only exception, besides the heart. The lungs appeared to gain rather than lose in absolute weight, or to increase of density by advance of years.

Now, on examining the viscera of subjects dead of morbus cordis, with the aid of the balance, a striking difference may soon be perceived from the averages just given. In the case of every viscus, without exception, whether for the whole of life above 15, or for each several interval of age, there was found a considerable excess on the side of morbus cordis. The following were the averages for life above 15:—

Table of visceral average weights in Morbus Cordis.

	MALES.	FEMALES.
Encephalon..................	47¼ oz.	43⅗ oz.
Cerebellum..................	5·17 oz.	4·69 oz.
Lungs..................	55½ oz.	36 oz.
Liver..................	57 oz.	50¾ oz.
Spleen..................	6¾ oz.	5½ oz.
Stomach..................	5⅖ oz.	5¾ oz.
Pancreas..................	3 oz.	2½ oz.
Kidneys..................	10 oz.	9¼ oz.

The numbers from which these averages were deduced, were so considerable as to entitle them, it is conceived, to much confidence.

The observations made at the Infirmary of St. Marylebone, relating to general visceral enlargement in chronic diseases, lead to two conclusions not easily anticipated:—1. That morbus cordis of every kind, whether simply hypertrophous, or complicated with pericardial or valvular disease, whether evincing excess or defect of cardiac contractile energy, is usually accompanied by hypertrophy of all the viscera. 2. That phthisis also is, in most cases, attended by general visceral over-nutrition, but in a degree much less striking, and more moderate than morbus cordis.

Complicated nature of Heart Cases; morbific influence of Morbus Cordis.

The last paragraph conducts us naturally to the subject of the heart's pathological relations: on this point the following figures serve to show that in complication, as in frequency and fatality, morbus cordis is the chief of organic diseases.

Of 144 cases of morb. cordis, (exclusively of cases involving valvular lesion,) the following proportions were found to present well marked complications, as follows :—

Phthisis	16	per cent.	Various diseases .... 20 per cent.	
Pleuritis	20	,,	viz., Delirium tremens; Cholera; Metritis; Peritonitis; Hæmorrhagies; Morb. Cærul.; Mors. subit; Exanthemata; Aneurism; Pyrexiæ, continued and intermittent; Morb. Chron. Cerebri; Influenza; and Diarrhœa.	together about a dozen diseases.
Pneumonia and Pleuropneum.	25	,,		
Pericarditis....	15	,,		
Mania........	5	,,		
Apoplexy	11	,,		
Hypertrophy of all or several of the viscera			85 per cent.	

Add to the preceding, that but a very small proportion were free from bronchial disease; viz., chronic bronchitis, œdema pulmonum, hypertrophy of the bronchial ramifications, &c., and that a large proportion had dropsical effusions; and those figures gives us, so far as they go, an amount of complication greater by very much than has been found to obtain in the case of any other organic disease whatsoever.

TEMPERANCE IN THE UNITED STATES OF AMERICA.

BY JOHN C. WARREN, ESQ., M.D.,

Professor of Anatomy in Boston.

In 1813 a society was formed in Boston, called the Massachusetts Society for the suppression of Intemperance. The individuals who combined for this object were distinguished statesmen, clergymen, and physicians. The means employed were the annual distribution of discourses showing the great evils produced by the use of alkoholic drinks. The efforts of this society were met with ridicule and abuse for some years; their opinions, however, gradually extended among the people, and in the year 1826 the American Temperance Society was formed in the same city, and immediately began a train of active operations. In the year 1827 the Massachusetts Medical Society passed three important resolutions, almost unanimously—1. That the use of ardent spirits was not necessary to health and strength. 2. That the employment of alkohol and alkoholic medicines in fever had been carried to a pernicious extent. 3. That the most salubrious drink was water.

At about this period medical men, generally, in the northern states, united in opposition to the use of alkohol. The clergy attacked it from the pulpit; the judges and a great number of lawyers made use of official situations and public occasions to give expression to opinions unfavourable to the influence of ardent spirits. The results of all these movements appeared in the year 1835, from the following facts:— About 2,000,000 of persons who had been in the habit of using alkohol had abandoned it. More than 8000 temperance societies had been formed, embracing 1,500,000 members. Of these societies twenty-three were state societies, comprising all the states in the union but one. Four thousand distilleries had been stopped. More than 1,200 vessels sailed without ardent spirits, and the price of insurance lessened on these vessels. About 12,000 drunkards had been reclaimed, and more than 200,000 persons had abandoned the use of all intoxicating drinks. Since the year 1835 the numbers above stated have been increasing, and other important results have shewn themselves. The bills of mortality exhibit a decrease of deaths in the places where reform has been extensive. The inmates of poor-houses, compared with the increase of population, are diminishing; the amount of crimes is decidedly less, and it is a frequent occurrence to notice in the newspapers that a county jail is without a single tenant. Alienations of property from families, whose heads had become drunkards, have lessened in a very remarkable manner in almost every town; the use of wine is diminished among the rich, and instead of the strong Spanish wines, the light wines of France and Germany are getting into general use. In consequence of this the chronic affection of the stomach, commonly called dyspepsia, which was very prevalent, has almost disappeared, and gout is scarcely heard of.

The disuse of ardent spirits in the northern states is believed to have increased the physical power of this section at least one-sixth, so that if we allow for its population about 5,000,000, the force of a million of persons will have been added, while the expense of supporting the 5,000,000, instead of being increased, has diminished by the appropriation of that grain for nutrition which was employed for distillation.

The public sentiment is so strongly in favour of prosecuting the temperance reform, that it called on the legislature of Massachusetts to prohibit the sale of ardent spirits on Sundays about a year since; and this law has operated so satisfactorily, that in the present year (1838), a law has passed prohibiting the sale of ardent spirits in less quantities than fifteen gallons, thus annihilating all the grog-shops in that state at a single blow. A similar measure has been adopted by the state of Tennessee, in the west, at a distance of 1000 miles from Massachusetts, which is in the east, and other states will probably follow their example.

THE PROVINCIAL MEDICAL AND SURGICAL ASSOCIATION.*

The steady progress of the affairs of this Association from the period of its institution, six years ago, to the present time, serves most undeniably to evince that its founders made a correct estimate of the existing desire among the cultivators of medical science residing in the English provinces to combine together, so as to make their labours more instrumental than they had formerly been in the advancement of the healing art. Each revolving year has increased the number of its members, which now amount to 1080, and the influence that has arisen from this additional strength has been directed to the accomplishment of the objects which were at the commencement of the undertaking specified as most worthy of regard.

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* Drawn up by a Member, from the Report, and from other sources.

DISTRICT BRANCHES.

The system which was sanctioned at the Cheltenham anniversary meeting, of dividing the association into district branches, is likely to be attended with very favourable results, by adding to the number of its members, and by facilitating the scientific and social intercourse which it is the great object of this association to promote. Since the last anniversary, two district branches have been added to those which were then in existence, viz., one at Newton, in Lancashire, called the Newton Branch, comprehending members residing at Manchester, Liverpool, Warrington, and several towns in the north of England ; the other at Shrewsbury, called the Shropshire and North Wales District Branch. There are now therefore six branches—the Eastern, the Wells, the Southern, the Bath, the Newton, and the Shropshire Branch of the Provincial Medical Association. Each of these branches has, in compliance with the laws passed last year, submitted the regulations by which they are governed to the central council of the association, and they have by them been confirmed. There is nothing in these regulations which calls for any comment, as they are formed on the basis of the resolutions agreed upon by the Cheltenham meeting. It may, however, be right to remark, that the associates in the Newton Branch have declined receiving the allowance of one-seventh part of the amount of their subscriptions to defray the expenses of the District Branch, as they prefer meeting this expenditure by an additional contribution among themselves.

FINANCES.

The state of the finances is very satisfactory. The demands upon the funds have been greater than before, yet the income has been so far increased, that a larger balance than last year is in the hands of the Treasurers.

TRANSACTIONS.

The Society has published the sixth volume of transactions. It is gratifying to observe the progress the association is making in laying before the public the Medical Topography of England ; the memoirs on Exeter and Cheltenham abound in interesting medical and statistical details, which, if followed up by similar descriptions throughout the kingdom at large, cannot fail to be productive of much benefit. The replies to the inquiries respecting the epidemic influenza have enabled the authors of the report on that subject to publish a communication of very great value. The result of this inquiry is very satisfactory, as it shows that in all future epidemics a similar plan may with propriety be adopted, and it has encouraged the council to issue queries of a similar nature respecting small-pox and the protecting influence of vaccination. It has been suggested also that were members generally to communicate the results of their experience in the management of certain diseases upon which there exists at present considerable difference of opinion, valuable information might be expected to accrue. Cases which, taken separately, are of little value in the establishment of correct views, either of pathology or practice, when arranged and compared with those already recorded would thus possess great interest and lead to important results. The council are, therefore, disposed to urge members to forward notices or complete histories of any such cases as may occur in their practice, with the view of classifying them upon some future occasion, when they shall be in sufficient number or of sufficient importance to render it desirable to publish them.

BENEVOLENT SOCIETY.

The connection of a Benevolent Fund with the Association is too important to be passed by unnoticed. The fund has come into active operation; but it is not necessary to do more in this place than strongly to recommend this object of the association to the cordial support of the members. The committee at Cheltenham last year recommended collecting contributions in small sums. This recommendation has been acted upon by a member at Warrington, who, through the assistance of friends, has collected upwards of thirty pounds: thus proving that, by a little exertion, a considerable addition may in this manner be made to the fund.

PAROCHIAL MEDICAL RELIEF.

The question of parochial medical relief, to which so much attention has been given by this association, has, in compliance with the prayer of the petition sent last year from this association to parliament, received a favourable consideration from the House of Commons, and it is much to be desired that the recommendations of the parliamentary committee should be speedily acted upon by the poor law commissioners. A committee has been appointed by the association to watch the further progress of the subject, and to suggest to the council from time to time such measures as may appear to them necessary to meet circumstances as they arise.

PRIZE ESSAY.

The committee appointed at Cheltenham to fix on the subject of the Thackeray prize, sent in their report early in the present year, and the council lost no time in making known their determination through the periodical press, and have announced that a prize of fifty pounds will be awarded to the author of the best essay, having for its object:—The investigation of the sources of the common continued fevers of Great Britain and Ireland, and the ascertaining of the circumstances which favour the diffusion of these diseases, and also those circumstances which may have a tendency to render them communicable from one person to another. The prize will be open to the competition of the members of every accredited school for medicine and surgery in the United Kingdom, and the essays are to be sent to the secretaries of the association on or before the 1st of January, 1840.

Each essay is to have a motto affixed, and to be accompanied with a sealed note, containing the name and residence of the author, and the motto is to be written on the outside of the note.

EMPIRICISM.

One duty which should never be forgotten by the members of the association, is that of assisting, in every practicable way, to improve the medical art, and to uphold the dignity of the profession.

The evils resulting from quackery are of so obvious a nature, and it tends so much to obstruct the steady progress of medical science, that its suppression is devoutly to be wished. Within the last two or three years there has been a growing opinion that the legislature should interfere, and endeavour to lessen these evils. It is, however, certain that no legislative enactment could be so framed as to prevent those who are ignorant from placing reliance on quacks, and it would not be easy to interdict the swallowing of their pills and potions; but though legislative authority may not have either the right or power directly to suppress quackery, it need not give it sanction and support, as is now done.

It is hoped that ere very long the whole question of medical legislation will be brought before parliament by Mr. Wakley and Mr. Warburton, when an opportunity will occur to frame such legislative enactments as may be practically beneficial. The association in the mean time may be employed in calm and philosophical inquiry into the nature of the evils, their extent and remedies, by which means they may be enabled, at the proper season, to render valuable aid in legislating upon this subject.

A committee of members has therefore been appointed to consider the nature, extent, and evils of quackery; and to report on the same, with a view of devising such corrections as the expositions thus made may indicate. A committee is also engaged in considering what measures can be devised to improve the general polity of the profession, which on all hands is allowed to be very defective, and should Mr. Warburton and Mr. Wakley remain inactive during another session, they will in all probability, at the next anniversary, recommend the association as a body to petition parliament on this subject.

SECTIONS OF MEMBERS.

The Association is about to be divided into sections for the prosecution of particular departments in medicine. As the question of vaccination is at this time exciting considerable interest, a section of members was appointed at the last anniversary, to whom the replies to the queries of the council on this subject are sent, and the whole question is referred to them for illustration; and if in this instance the arrangement be found to work well, sections on other branches of medical science will, at a future day, be appointed.

CONCLUSION.

To conclude, it is not irrelevant to remind each member of the implied engagement which he enters into when joining this association, to forward the enlightened objects for which it was instituted. These objects are dignified and ennobling; and if pursued with ardour and perseverance, must ultimately enlarge the boundaries of knowledge, elevate the character of medical men in the community, lessen the sufferings of humanity, and thus confer a blessing upon mankind.

ON CHOLERA.

BY WILLIAM FARR.

I WISH the following investigation to be considered as a continuation of the article in the last Annual, on Prognosis. The tables were deduced from the registered results of 9,372 cases of Cholera recently published by the Board of Health in Rome. I am indebted to the kindness of Sir James Clark for the Report in which this invaluable series of facts was published.

Table 1 shows the simple observations as they were published, distinguishing the *recoveries* and *deaths* of *males* and *females*, day by day, till all the cases had terminated.

There were 9,372 patients; 3,953 recovered, 5,419 died. Each case was observed till it terminated, and the duration was deduced from the day of termination.

The next step was to construct a *table of sickness*, (II.); this was accomplished so as to furnish, by a very simple calculation,

1st. At any period of the disease, the *probability of recovering or dying.*

2nd. At any period, the *probable duration* of the disease.

3rd. At any period, the *mean future duration* of the disease in days.

The last case terminates fatally on the 57th day, leaving none at the end of that day. The table is read thus:—Of 9,372 cases of Cholera, supposed to commence at the same time, 7,251 remain *sick* at the *end* of the *first day;* 3,928 of which terminate in *recovery*, 3,323 in *death;* 1,494 cases *terminating* on the *following day* (2nd day), 82 in *recovery*, 1,412 in *death.*

It will be observed that 9,372 cases form the basis of the table (col. A.); 2,121 cases terminated in the *first day* (24 hours), 25 by *recovery*, 2,696 by *death*. The 2,121 cases were subtracted and left, 7,251 remaining *sick* at the *end* of the *first day.*

Col. A. was formed by successively subtracting the numbers in col. D. In like manner the cols. B. and C. were deduced by the successive subtraction of the numbers in cols. E. and D.

The probability of ultimate recovery is seen at once in these cols. For example: the probability of recovery at the end of the first day is as 3,928 to 3,323. There are 7,251 chances, 3,928 in favour of the patient's recovery, 3,323 in favour of his death. At the end of the 10th day how have matters changed? The general chance of recovery at that period is as 1,662 to 216, nearly 8 to 1.

The following Table expresses the probability of Recovery and Death on several days, certainty being 1.000.

End of Day.	The probability of Dying.	The probability of Recovery.	
0	.578	.422 or about	2 to 3
1	.458	.542	1 to 1
2	.332	.668	2 to 1
3	.271	.729	3 to 1
4	.237	.763	3 to 1
5	.209	.791	4 to 1
6	.179	.821	4 to 1
7	.157	.843	5 to 1
8	.138	.862	6 to 1
9	.127	.873	7 to 1
10	.115	.885	8 to 1
20	.090	.910	10 to 1

The two probabilities added together make certainty, for the case is *certain* to terminate in recovery or death. Represented in a diagram by lines proportional to the two probabilities, the chance of dying is seen to decline and describe a regular and beautiful curve from the 1st to the 15th day.

The mean future duration of Cases of Epidemic Cholera.

Day.	All Cases.	Cases of Recovery.	Fatal Cases.
0	6.00 days.	10.64 days.	2.62 days.
5	6.91 ..	7.63 ..	4.72
15	7.89 ..	7.70 ..	6.52

The mode of deducing the mean future duration of cases was described in the "British Medical Almanack" for 1838, to which we must refer.

The table of sickness may be constructed by any one; it is, however, necessary to take, as in the present instance, a considerable number of cases to obtain uniform results, and to neutralise the irregularities arising from individual peculiarities, differences of constitution, severity of attack, &c. In applying the *general law* to individual cases, all the peculiarities must be taken into account; thus it will be found that the mortality increases with age 34 per cent. every ten years, &c.

The slightest examination proved that the rate of mortality varied at different periods of the disease. The rate of mortality is expressed by the deaths out of a given number sick in a given time: in the present instance it was thus deduced: From Table II. it appears that 2,096 *deaths* occurred in the first day; the mean number *sick* was nearly the mean of the numbers sick at the *beginning* and *end* of the day, or 8,311.

The mortality per cent. on the *first* day is obtained by the rule of three: it is 25 per cent. The mortality on the following days was obtained in the same manner:

Example......8,311 : 2,096 :: 160 : 25.

By a precisely similar method the rate of recovery was calculated. Table III. presents the results down to the 25th day.

It will be perceived that the rate of mortality rises suddenly, and attains its maximum on the *first day*; it declines on the second to 21·7; on the third to 10·5; on the fourth to 6·3 per cent.; and so on gradually to the end, but not quite regularly, particularly when the deaths, on which the rate is founded, become few. Still it will be seen, that the oscillation describes a regular curve, and the direction of that curve can be calculated by a very simple formula. The mean length of the lines extending to a regular curve is the same as the mean length of the lines extending to the waving curve. The irregularities are partly due to errors of observation, and partly to accidental irregularities not neutralised by the number of observations. The same irregularities occur in the *observed orbits* of the *planets*, and in all other *observed physical phenomena*. Our instruments are more or less imperfect, and disturbing causes have to be taken into account.

The numbers in the column "Deaths," headed "Calculated," were deduced by dividing the rate of mortality, 6.315, against day 4, and its products successively by 1.1241. logarithm 0.0508. The rate of mortality decreases nearly 12 per cent. every day; and in the following illustration, to simplify the division, we take 1.12, which will furnish an approximation sufficiently near.

1.12)6.315(5.6 mortality on the 5th day.
560

715
672

430

5.6 divided by 1.12 gives 5.0, the mortality on the 6th day, &c. &c.

The rate of mortality on any day being given, the rate of mortality on any other day, can be calculated.

I should add, that of the 9,372 patients the ages ranged from 1 to 110 years; 6,076 occurred between the ages 21 and 50.

Ages.	Numb. of Cases.
11......20	1,063
21......30	1,708
31......40	1,797
41......50	1,508

TABLE I.—CHOLERA IN ROME, July 2 to Oct. 14, 1837,

(*Ristretto della Durata della Malattia.*)

Showing the Days on which the Disease terminated.

Day.	Recovered.		Died.		Day.	Recovered.		Died.	
	Males.	Fem.	Males.	Fem.		Males.	Fem	Males.	Fem.
1	16	9	969	1127	29	8	8	1	1
2	39	43	695	717	30	9	16	—	—
3	145	82	271	292	31	7	11	2	—
4	120	111	136	161	32	5	9	—	5
5	121	155	118	111	33	5	9	2	—
6	148	157	95	114	34	3	4	—	3
7	143	152	73	71	35	4	2	—	1
8	118	172	43	69	36	6	4		
9	139	168	35	43	37	2	4		
10	134	119	23	40	38	5	1		
11	105	146	12	30	39	4	1		
12	87	116	16	21	40	3	4		
13	85	87	22	12	41	2	4		
14	77	63	7	6	42	1	1		
15	61	61	9	7	43	—	5		
16	43	75	6	8	44	4	1		
17	41	33	3	2	45	2	2		
18	27	34	2	5	46	3	2		
19	32	35	2	1	47	2	—		
20	22	29	1	4	48	1	—		
21	22	19	1	6	49	—	1		
22	17	24	—	2	50	1	—		
23	25	20	3	1	51	—	1		
24	9	9	2	—	52	1	2		
25	13	11	—	2	53				
26	8	9	1	3	54				
27	9	18	—	3	55				
28	9	11	—	—	56	—	—	1	
						1893	2060	2551	2868
Total Recoveries and Deaths						3953		5419	
Total Cases						9372			

TABLE II.—*Recovery and Mortality in Epidemic Cholera.*

Showing out of 9372 Cases of Cholera the number remaining Sick (C.) at the end of every day; the number to Recover, (A.); and to Die, (B.); also the number Terminating, (D.); Dying, (E.); and Recovering (F.) on the day following.

	A.	B.	C.	D.	E.	F.
Duration.	To Recover.	To die.	To Recover or Die.	Terminating	Dying.	Recovering.
				On the following day.		
Days.						
0	3953	5419	9372	2121	2096	25
1	3928	3323	7251	1494	1412	82
2	3846	1911	5757	790	563	227
3	3619	1348	4967	528	297	231
4	3388	1051	4439	505	229	276
5	3112	822	3934	514	209	305
6	2807	613	3420	439	144	295
7	2512	469	2981	402	112	290
8	2222	357	2579	385	78	307
9	1915	279	2194	316	63	253
10	1662	216	1878	293	42	251
11	1411	174	1585	240	37	203
12	1208	137	1345	206	34	172
13	1036	103	1139	153	13	140
14	896	90	986	138	16	122
15	774	74	848	132	14	118
16	656	60	716	79	5	74
17	582	55	637	68	7	61
18	521	48	569	70	3	67
19	454	45	499	56	5	51
20	403	40	443	48	7	41
21	362	33	395	43	2	41
22	321	31	352	49	4	45
23	276	27	303	20	2	18
24	258	25	283	26	2	24
25	234	23	257	21	4	17
26	217	19	236	30	3	27
27	190	16	206	20	0	20
28	170	16	186	18	2	16
29	154	14	168	25	0	25
30	129	14	143	20	2	18
31	111	12	123	19	5	14
32	97	7	104	16	2	14
33	83	5	88	10	3	7
34	76	2	78	7	1	6
35	70	1	71	10	0	10
36	60	1	61	6	0	6
37	54	1	55	6	0	6
38	48	1	49	5	0	5
39	43	1	44	6	0	6
40	37	1	38	7	0	7
41	30	1	31	2	0	2
42	28	1	29	5	0	5
43	23	1	24	5	0	5
44	18	1	19	4	0	4
45	14	1	15	5	0	5
46	9	1	10	2	0	2
47	7	1	8	1	0	1
48	6	1	7	1	0	1
49	5	1	6	1	0	1
50	4	1	5	1	0	1
51	3	1	4	3	0	3
52	0	1	1	0	0	0
53	0	1	1	0	0	0
54	0	1	1	0	0	0
55	0	1	1	0	0	0
56	0	1	1	1	1	0

TABLE.—RATES OF MORTALITY AND RECOVERY.

Days.	Mean Number Sick.	Daily Recoveries.	Daily Deaths.	Out of 100 constantly sick :—				Days.
				Daily Deaths.		Daily Recoveries.		
				Observed.	Calculated.	Observed.	Calculated.	
1	8311	25	2096	25·219		0·301		1
2	6504	82	1412	21·710		1·261		2
3	5362	227	563	10·500		4·233		3
4	4703	231	297	6·315	6·315	4·912		4
5	4186	276	229	5·471	5·618	6·747	6·747	5
6	3677	305	209	5·684	4·998	8·295	7·929	6
7	3200	295	144	4·500	4·446	9·219	9·317	7
8	2780	290	112	4·029	3·956	10·432	10·949	8
9	2386	307	78	3·269	3·519	12·867	12·867	9
10	2036	253	63	3·094	3·130	12·426	13·658	10
11	1731	251	42	2·427	2·784	14·500		11
12	1465	203	37	2·526	2·477	13·857		12
13	1242	172	34	2·979	2·204	13·850		13
14	1062	140	13	1·224	1·961	13·183	13·304	14
15	917	122	16	1·744	1·744	13·304	12·826	15
16	782	118	14	1·799	1·552	15·090	12·365	16
17	676	74	5	·740	1·380	10·950	11·920	17
18	603	61	7	1·161	1·228	10·126	11·493	18
19	534	67	3	·562	1·092	12·547	11·079	19
20	471	51	5	1·062	·972	10·828	10·680	20
21	419	41	7	1·670	·864	9·785	10·297	21
22	373	41	2	·536	·769	10·992	9·926	22
23	327	45	4	1·233	·684	13·762	9·570	23
24	293	18	2	·683	·609	6·143	9·226	24
25	270	24	2	·741	·541	8·808	8·894	25
26	246	17	4	1·623		10·542		26
27	221	27	3	1·357				27
28	196	20	0	—				28
29	177	16	2	1·130				29
30	155	25	0	—				30
31	133	18	2	1·504		11·800		31
32	113	14	5	4·405				32
33	96	14	2	2·083				33
34	83	7	3	3·614				34
35	74	6	1	1·342				35
36	66	10				12·547		36
37	58	6						37
38	52	6						38
39	46	5						39
40	41	6						40

MEMORANDUM FOR MEDICAL ANNUAL, 1839.

Several of the Statistical Reports on the health of the Troops in the Colonies which, we formerly intimated, were in the course of preparation by Mr. H. Marshall, Dep. Insp. Gen. of hospitals, and Capt. Tulloch, of the War Office, have now been completed; and the first series, embracing the details relative to the Troops in the West Indies, was submitted to Parliament last session, from which we extract the following results:

Annual Ratio of Mortality per 1000 of White Troops serving at each of the following Colonies in the West Indies.

	British Guiana	Trinidad.	Tobago.	Grenada.	St. Vincent's.	Barbadoes.	St. Lucia.	Dominica.	Antigua, &c.	St. Kitts, &c.	Average of the whole.
By Fevers	59·2	61·6	104·1	26·3	11·2	11·8	63·1	49·3	14·9	42·1	36·9
Eruptive Fevers .					·3						
Diseases of Lungs	6·4	11·5	11·	6·6	10·5	15·8	12·5	8·3	9·	9·5	10·4
,, Liver	1·	1·1	2·	4·5	1·6	1·4	1·	1·7	2·8	2·2	1·8
,, Stomach & Bowels....	8·9	17·9	24·	16·1	24·2	20·8	39·3	70·3	9·2	10·3	20·7
,, Brain	4·4	4·7	5·	4·6	2·8	3·3	4·3	5·3	1·9	2·8	3·7
Dropsies............	1·2	7·7	3·5	·8	1·6	2·4	2·	·7	1·4	·9	2·1
All other Diseases	2·9	1·8	3·2	2·9	2·7	3·	·6	1·8	1·4	3·2	2·9
Total	84·	106·3	152·8	61·8	54·9	58·5	122·8	137·4	40·6	71·	78·5

Annual Ratio of Mortality per 1000 of Black Troops and Pioneers serving in each of the following Colonies.

	British Guiana	Trinidad.	Tobago.	Grenada.	St. Vincent's.	Barb^{a}does.	St. Lucia.	Dominica.	Antigua, &c.	St. Kitt's, &c.	Average of the whole.	Bahamas Command.	Honduras Command.
By Fevers	8·5	3·2	8·6	4·8	·9	3·8	5·2	7·7	1·7	10·5	4·6	5·6	4·4
Eruptive Fevers .		7·			1·8	·2	5·4	·4	·3		2·5	1·7	
Diseases of Lungs	17·9	16·4	12·	9·5	13·	18·7	14·8	16·7	16·8	23·9	16·5	9·7	8·1
,, Liver..........	·3	·8	1·	1·		·9	·9	1·6	1·7	·7	·9	·1	·8
,, Stomach & Bowels...	5·8	5·5	4·8	4·2	11·2	12·1	7·1	7·4	3·6	6·3	7·4	6.5	2·8
Brain	3·3	2·8	2·	4·2	2·8	1·9	2.4	·4	1·4	1·4	2·2	1·9	1·4
Dropsies............	2·4	1·1	4·3	2·1	2·8	3·1	2.6	1·2	·9	·7	2·1	2·6	1·6
All other Diseases	2·4	2·9	1·5	2·6	3·7	5·3	4.3	4·5	2·5	2·8	3·8	5·6	4·9
Total	40·6	39·7	34·2	28·4	36·2	46·	42·7	39·9	28·9	46·3	40·	33·	24·
Ratio of Mortality among the Male Slave Population of all ages in these Colonies, as stated in No. 3 of Appendix...	34·	30·	47·	36·	34·	31·	35·	35·	30·	30·	30·		

Different Stations in the same Island, however, are found to affect the health of Europeans in a very different degree. Take the following Military Stations of Jamaica for instance.

	Annual ratio of Mortality per 1000 of the White and Black Troops serving at each of the following subordinate Stations.										Ratio of Mortality per 1000 of White Troops serving throughout the Island.
	Up Park Camp.	Port Royal.	Fort Augusta.	Spanish Town.	Stoney Hill.	Port Antonio.	Falmouth.	Montego Bay.	Maroon Town.	Lucea.	
By Fevers	121·	93·9	55·5	141·1	70·5	126·	80·	150·7	15·3	63·2	101·9
Diseases of the Lungs	8·5	7·3	9·7	9·1	6·5	5·2	8·7	7·9	6·3	10·2	7·5
,, Liver	·8	1·6	·3	·3	1·9	1·2	1·6	...	·3	·6	1·
,, Stomach & Bowels	5·8	5·9	3·3	4·8	5·8	6·9	2·6	5·6	3·7	4·5	5·1
,, Brain	2·	2·4	1·3	3·7	1·2	2·8	4·8	10·2	1·3	1·9	2·6
Dropsies	·8	·6	·7	1·6	1·9	2·4	2·6	1·1	2·4	1·9	1·2
All other Diseases	1·7	1·4	2·7	1·8	2·4	4·8	2·3	3·4	3·4	2·6	2·
Total	140·6	113·1	73·5	162·4	90·2	149·3	102·6	178·9	32·7	84·9	121·3

The mortality falls very unequally in different Years, as will appear from the following calculation of the proportion of the White Troops who died annually in the West Indies, in the following Years:

Out of every 1000 White Troops in the undermentioned Colonies, the following proportions have died in each year, from 1817 to 1836 inclusive.											
YEAR.	British Guiana.	Trinidad.	Tobago.	Grenada.	St. Vincent's.	Barbadoes.	St. Lucia.	Dominica.	Antigua, &c.	St. Kitt's, &c.	Average of the whole
1817	64	257	235	190	148	123	87	559	54	70	162
1818	27	398	176	105	96	77	206	209	35	170	126
1819	73	152	222	68	33	59	92	67	30	9	83
1820	160	30	814	51	36	102	81	63	25	74	105
1821	217	23	270	75	55	121	123	396	49	106	109
1822	77	66	88	45	63	58	394	99	32	15	77
1823	60	60	25	24	71	23	123	76	50	51	49
1824	117	68	54	19	66	49	229	57	20	60	70
1825	94	108	87	57	77	49	93	110	32	126	76
1826	95	92	135	48	55	44	75	133	26	31	68
1827	144	79	67	30	91	34	272	68	54	17	85
1828	134	167	94	135	44	37	60	43	67	39	81
1829	59	21	116	69	36	49	88	97	53	63	58
1830	82	41	148	15	25	49	142	94	30	52	65
1831	110	62	135	21	27	66	74	68	36	25	69
1832	34	73	67	34	50	94	56	91	24	45	64
1833	55	49	75	19	23	36	108	132	43	80	50
1834	53	42	39	27	19	25	73	110	38	44	43
1835	60	62	34	54	26	32	93	141	78	83	57
1836	35	67	269	85	40	53	197	69	37	172	77
Average..	84	106·3	152·8	61·8	54·9	58·5	122·8	137·4	40.6	71·	78·5

Stations even within a few miles of each other enjoy very different degrees of salubrity in the same years, though liable to be affected by the same general causes, such as heat and moisture. For instance, the annual ratio of mortality at each of the stations in Jamaica, for a period of twenty years, was as follows:—

Years.	Out of every 1000 Troops at the undermentioned Stations, the following proportions have died in each year from 1817 to 1836 inclusive.										Average of whole Island.
	Up Park Camp.	Port Royal.	Fort Augusta.	Spanish Town.	Stoney Hill.	Port Antonio.	Falmouth.	Montego Bay.	Maroon Town.	Lucea.	
1817	83	39	34	128	97	192	74	89	None.	71	88
1818	65	50	33	278	37	89	67	87	10	95	89
1819	501	316	103	68	301	346	130	—	12	79	294
1820	160	58	92	273	50	84	192	—	29	45	153
1821	130	225	44	91	45	219	53	—	26	41	116
1822	443	205	51	242	47	52	117	51	30	76	171
1823	82	83	31	200	25	51	24	—	35	87	65
1824	45	100	81	207	30	194	52	217	38	64	84
1825	341	321	58	399	453	—	184	—	30	178	307
1826	72	94	61	186	18	—	227	—	21	43	80
1827	225	155	280	164	287	94	233	—	30	30	224
1828	118	18	84	82	37	147	61	212	41	12	74
1829	43	82	70	51	13	233	51	109	15	35	62
1830	120	148	42	124	18	135	86	—	58	350	97
1831	110	34	79	236	174	124	255	—	48	—	133
1832	91	32	24	57	72	185	75	358	67	167	111
1833	78	39	56	67	31	226	70	174	81	35	86
1834	70	107	51	155	35	173	95	121	16	26	93
1835	52	36	70	194	34	117	84	54	4	25	75
1836	51	9	60	144	21	25	38	348	29	160	61
General Average	140·6	113·1	73·5	162·4	90·2	149·3	102.6	178·9	32·7	84·9	121·3

The Mortality increases with the advance of Age in a much more rapid ratio than in temperate climates, as will appear by the following proportions, deduced from the results of Seven Years.

	WINDWARD AND LEEWARD ISLANDS.			JAMAICA.		
Age.	Aggregate Strength at each Age in Returns of Seven Years.	Total Deaths at each Age in Returns of Seven Years.	Annual Ratio of Deaths per Thousand Living at each Age.	Aggregate Strength at each Age in Return of Seven Years.	Total Deaths at each Age in Returns of Seven Years.	Annual Ratio of Deaths per Thousand Living at each Age.
Under 18. .	244	1	4	88	5	57
18 to 25	12,372	613	50	8,059	562	70
25 to 33	13,633	1,004	74	6,607	705	107
33 to 40	3,555	346	97	1,547	203	131
40 to 50	609	75	123	352	45	128
Total	30,413	2,039	67	16,653	1,520	91

Officers are neither so liable to Sickness nor Mortality, in the West Indies, as the Troops generally; the relative influence of the principal Diseases incident to that climate on both these classes, are thus illustrated :

	WINDWARD AND LEEWARD ISLANDS.				JAMAICA.			
	Annual Ratio of Admissions per 1000 of Mean Strength.		Annual Ratio of Deaths per 1000 of Mean Strength.		Annual Ratio of Admissions per 1000 of Mean Strength.		Annual Ratio of Deaths per 1000 of Mean Strength.	
	Officers only.	Troops generally.	Officers only.	Troops generally.	Officers only.	Troops generally.	Officers only.	Troops generally.
By Fevers....................	358	717	29·	36·9	386	910	68·	101·9
Eruptive Fevers........	...	$\frac{2}{10}$	...	...	1	$\frac{2}{10}$	...	...
Diseases of the Lungs	53	115	2·9	10·4	35	$84\frac{8}{10}$	1·5	7·5
,, Liver........	41	22	2·7	1·8	18	10	1·	1·
,, Stomach & Bowels	148	421	2·4	20·7	77	238	3·	5·1
,, Brain	9	28	2·7	3·7	$4\frac{1}{2}$	14	3·	2·6
Dropsies	2	$7\frac{8}{10}$	...	2·1	$3\frac{1}{2}$	5	2·5	1·2
All other Diseases......	234	592	1·	2·9	111	550	1·	2·
Total.........	845	1,903	40·7	78·5	636	1,812	80·0	121·3

The same seasons are not alike unhealthy at all the stations, though there is a very general preponderance of sickness in the summer and autumnal months. The following are the actual numbers admitted into Hospital in each colony, in every month during a long series of years.

	British Guiana, for 19 Years.		Grenada, for 18 Years.		St. Vincents, for 19 Years.		Barbadoes for 19 Years.		St. Lucia. for 19 Years.	
	Total Admitted.	Total Died.	Total Admitted.	Total Died.	Total Admitted.	Total Died.	Total Admitted.	Total Died.	Total Admitted.	Total Died.
January	2899	97	785	25	819	32	3366	124	1202	75
February ...	2936	86	780	22	893	24	3385	115	1209	77
March	2743	81	773	22	877	41	3410	116	1168	61
April	2601	73	819	14	908	31	3895	91	1245	66
May	2758	59	817	20	1020	29	4389	141	1402	91
June	3174	103	789	23	1027	38	4202	139	1295	66
July	4248	180	780	19	971	29	4177	133	1382	62
August	4720	177	769	27	807	33	4041	131	1337	59
September..	4536	155	880	52	716	37	3599	132	1259	55
October......	4006	113	718	37	673	25	3492	160	1078	68
November..	3387	76	747	32	661	23	3298	178	1185	56
December ..	3086	67	729	20	677	16	3127	129	1174	84

	Dominica. for 19 Years.		Antigua and Montserrat, for 19 Years.		St. Kitts, Nevis, and Tortola, for 19 Years.		Jamaica, for 18 Years.		Bahamas, for 12 Years.	
	Total Admitted.	Total Died.	Total Admitted.	Total Died.	Total Admitted.	Total Died.	Total Admitted.	Total Died.	Total Admitted.	Total Died.
January	644	38	1009	56	861	52	7465	559	458	8
February	533	28	1009	46	709	22	6725	351	377	14
March	624	41	925	36	646	26	6560	291	467	15
April	682	34	944	36	765	20	6560	262	482	15
May	606	22	941	26	868	30	7039	286	570	15
June	809	29	954	23	844	42	7303	323	476	10
July	926	39	999	26	796	30	7667	427	527	15
August	773	69	945	26	809	28	7769	786	568	35
September...	782	51	958	30	818	30	7354	515	747	38
October.......	733	75	985	40	799	55	7730	640	765	33
November...	716	91	941	46	809	56	7709	801	659	24
December...	598	45	845	35	764	44	7260	725	544	18

Similar Reports upon the health of the Troops in several of the other Colonies have been prepared, and will be submitted to Parliament next session. From the accuracy with which information can be obtained through the medium of military returns, various interesting facts have been established in regard to the influence of different diseases at various ages. Take, for instance, the following ratio of mortality, per thousand of the strength, by Epidemic Cholera, at each of the stations where that disease prevailed among the Troops :—

Age.	Great Britain.*	Gibraltar.	In Canada.	NovaScotia and N. Brunswick.
18 to 25	2.3	47.	15.5	1.7
25 to 33	2.5	41.	23.	24.9
33 to 40	4.	54.	34.5	74.1
40 to 50 and upw.	4.9	60.	70.6	102.6
Average.	2.8	43	22.4	24.1

Ratio of Mortality by Fever in each of the Mediterranean Stations.

Age.	Gibraltar.	Malta.	Ionian Island.	Total in Mediterranean Stations.
18 to 25	1.8	2.1	3.8	2.4
25 to 33	1.5	2.1	6.1	3.5
33 to 40	2.5	5.0	7.1	5.4
40 to 50	2.9	6.0	5.2	5.0

The Statistical details of each of the Colonies are, we understand, treated with the same minuteness in the forthcoming volumes as in that relative to the West Indies. We hope, in the ensuing year, to be able, from this source, to give a scale of the mortality by all the principal classes of diseases among Troops thoughout the globe.

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* The proportion of mortality by Cholera appears not nearly so high among Troops in Britain as in foreign stations, principally because that disease prevailed only at a few of the towns in which the Troops were quartered, though the ratio has been calculated on the strength of all the Troops serving throughout the kingdom.

STATISTICS OF PRIVATE PRACTICE.

This is the field from which the richest harvest of useful statistical facts may be reaped; it is only necessary that ten or twenty practitioners—situated however remotely—but all living in the country or in town, should combine to form a collection of facts sufficient to show the frequency and mortality of every kind of disease in the different classes of society. If any associations of this kind be formed, we shall be happy to assist in arranging their observations for publication.

Statistical Registry for Persons in Private Practice.

No.	Name.	Occupation.	Residence.	Date of Attack.	Date of First Visit.	Date of Last Visit.	DURATION OF DISEASE.		Age	Disease and Description.	Treatment.
							When First seen.	State and Day when last seen.			
							Days.	Days.			
1	E. Davis.	Baker.	Edward-st.	July 1st.	July 3rd.	Aug. 7th.	2	Recovered, 37.	40	Confl. Sm. Pox.	
32	J. Jones.	Farmer.	Clarity.	Aug. 2nd.	Aug. 2nd.	Aug. 4th.	0	Died (red ink) 2.	30	Asiatic Cholera	

There should, perhaps, be a column to enter the day the patient can digest food; another to mark the day on which he resumes his ordinary occupation.

In addition to this, the patients actually ill might be enumerated every quarter day, according to age, disease, duration of disease; and this taken in connexion with an annual enumeration of all the persons in practice, would furnish data for more important investigations than have ever yet been attempted. When influenza or cholera rages, the number of patients remaining under treatment should be enumerated every five or ten days.

W. F.

THE SCOTCH UNIVERSITIES.

THE following facts are from the Report and Evidence recently published by the Royal Commision of Inquiry into the Universities of Scotland. They are important at the present time, that an inquiry into the English Universities is expected to take place; and a University is establishing in London.

EDINBURGH.

This University was founded by the citizens of Edinburgh, under the charter of James VI., and the Town Council are still its patrons. They founded a Professorship of Botany in 1676; Theory of Physic, 1685; Practice of Physic, 1685; Anatomy and Surgery, 1705; Chemistry and Chemical Pharmacy, 1713; Midwifery, 1726; Clinical Medicine, 1741; Materia Medica, 1768; Clinical Surgery, 1803; Military Surgery, 1806; Medical Jurisprudence and Police, 1807. The three latter professorships were not of the medical faculty. General Pathology has been since added.

The Town Council regulates the fees; which were from their institution, 3 guineas, in the medical classes, and raised in 1812 to 4 guineas, except in the classes of Clinical Surgery, Military Surgery, and Medical Jurisprudence. The Report (October, 1830) states the following as the salaries of the Professors. The number of students is from an average of the five previous years. Anatomy and Surgery, 50*l.* from Town Council; 222 students, at 4 guineas, and 35 in a private class, at 1 guinea = 1019*l.* Chemistry, 527 students, 2213*l.* Botany, from the Crown, 100*l.*; Town Council, 28*l.*; 214 students, 899*l.* = 1027*l.* Materia Medica, 305 students, 1281*l.* Theory of Physic, 882*l.* Practice of Physic, 240; students, 1008*l.* Midwifery, 142 students, 596*l.* Clinical Medicine; winter, 172 students, at 4 guineas; summer, 25, at 3 guineas = 801*l.* Taught generally by four Professors of the Faculty of Medicine—two one year, two the next. Clinical Surgery, from the Crown, 100*l.*; 194 students, at 3 guineas, 611*l.* = 711*l.* Military Surgery; from the Crown, 100*l.*; from 24 paying students, 76*l.* = 176*l.* Medical Jurisprudence; from the Crown, 100*l.*; six students 18 guineas = 118*l.* 18*s.* Twenty-nine Professors, and the Principal, had salaries amounting to 19,682*l.*; 11 Medical Professors had 9833*l.* annually; each on an average 894*l.* The maximum Chemistry, 2213*l.*; the minimum Medical Jurisprudence, 119*l.* 860 students matriculated annually, 1821—26; each therefore paid about 11*l.* In the same period 113 graduated annually, and paid 23*l.* 13*s.* each; which, after deducting 10*l.* for the stamp and other fees, left 1186*l.* annually to be divided among the Examiners. The six senior examining Professors received 200*l.* a year each; the Clinical Professors the same sum. Besides the professional fee, a small fee—from 1*s.* to 6*s.*—was exacted at most of the classes; and 10*s.* for matriculation. No degree in medicine has been granted for fifty years without the personal attendance and examination of the candidates. The qualifications required of candidates have always been regulated by the *Senatus Academicus*. A *course* of study was first *prescribed* in 1767, prior to which time the fitness of candidates was judged of by examination.

Average number of Students.	YEARS.	MEDICAL GRADUATES.					
		Total from					ANNUAL AVERAGE.
		Scotland.	England.	Ireland.	British Colonies	Foreign Countries.	
394·1	1781—1790	86	67	86	8	33	28·0
403·6	1791—1800	80	103	113	36	62	39·4
715·3	1801—1810	133	114	167	43	36	49·3
794·8	1811—1820	323	183	232	61	41	84·0
860·7	1821—1826	162	216	221	58	20	112·9
614·0	1781—1826	784	683	819	206	192	58·3

There were 28242 years of attendance, and 2684 graduations; 10·5 years of attendance to one graduation. In 1811-20, the average number *attending* from Scotland was 469·0; from England, 181·9; Ireland, 83·2; British Colonies, 41·2; foreign countries, 19·5. Among the Scotch there were 14 years of attendance to each graduation; the English, 10 years; the Irish, 4 years; men from the Colonies, 7 years; foreigners, 5 years. A considerable number of the Scotch students probably took diplomas at the College of Surgeons only, where the annual number granted in 1790-99 was 25·5; 1800-1809, 52·3; 1810-19, 114·1; 1820-25, 136.

GLASGOW.

Nicolas V. founded the University in 1450, which however had no buildings of its own before 1460. The supporters, or incorporated members, were divided into four nations, that choose 4 Deputies, 4 Procurators, and a Rector *annually*. The University, in all the statutes, reserved to itself the power of adding, diminishing, dispensing, and interpreting; and it consulted in full congregation, where all the supports had a voice. The healthy, vital principle of responsibility, of representation, and of annual election, by the whole body, was the very essence of the old universities. They were sometimes deprived of this birthright by intrigue, and sometimes it was bartered for money, and apparent advantages. James VI. remodelled the University. A principal, three regents, an economist, and four poor students, were appointed to reside always and be supported by the College. The principal to be appointed by the Chancellor, Rector, Dean of Faculty, and five Ministers. Under the new statutes every person inscribed in the album of the University had a vote in the election of a Rector; and the Royal visitation (1727) declared that all the matriculated members, moderators or masters, and students, had the right of electing the Rector. The Rector, Dean, and Principal nominate the professors according to the *nova erectio;* they are now chosen by the *faculty*, consisting of the principal and all the professors, except the four Regius Professors, appointed since 1815. The Regius Professors have no share in the funds or patrimonial rights; no vote in the election of professors. They examine candidates for medical degrees, but the fees are taken by the faculty professors. The Principal is appointed by the Crown. The Professors of Medicine and Anatomy are also appointed by the Crown. The class fees paid to the Regius Professors of Natural History, Surgery, Midwifery, Chemistry, and Botany, are fixed by the senate. The amount of class fees to Anatomy, Botany, Theory and Practice of Medicine, was raised by the faculty in 1800 to 3g. The fees at the seven medical classes are 3g.

Emoluments of the Principal, (founded 1577,) 456*l.*; Natural Philosophy, (1577,) 700*l.*; Natural History, (1807,) 216*l.*; Materia Medica, (a lectureship, 1765,) salary, 70*l*; 80 students=322*l.*; Botany, (1818,) salary, 150*l.*; students 45; for degree of M.C. 27*l.*=319*l.* Chemistry, (1818,) salary, 50*l.*; 143 students; for degree of M.C., 27*l.* = 528*l.* Surgery, (1815,) salary, 50*l.*; 195 students; for degrees of M.C., 27*l.*= 692*l.* Anatomy, (1709,) salary, 250*l*,; 225 students; fees for degree of M.D., 72*l.*; of C. M., 27*l.* 6*s.* = 1058*l.*—100 students attend the dissections, fees not stated. Medicine, (1673, revived 1714,) salary, 270*l.*; 76 students; for degrees of M.D., 72*l.*; of C. M., 27*l.* 6*s.*—The number of students is the average number of 5 years.

The Professors of Natural Philosophy, Anatomy, and Medicine, have houses provided for them. The nett revenues of the University in 41 years amounted to 276,923*l.* The salaries to Principal and Professors amounted to 113,468*l.*; to Lecturers, 4860*l.* In 1824, the annual revenue was 9522*l.* There was besides received of writable property, 1346*l.* Principal sums and loans, 6500*l.* Total 17,368*l.* In 1834, the Principal and Professors were paid 4077*l.*; the Lecturers, 145*l.*; Ministers, 1371*l.*; students, as prizes, 75*l.*; Bursar's aid as mortifications, 194*l.*

The fee for the degree of M. D. is 25*l.* 3*s.*; of Master of Surgery, (C.M.) 10g. Degrees of M.D. granted annually, 1781—90, 8·8; 1791—1800, 6·7; 1801—10, 8·3; 1811—20, 9·7; 1821—30, 22·4. In 1821—31, degrees of C.M. granted, 209.

ABERDEEN.

The University.—King's College was erected in 1494, by a bull of Alexander VI., at the instance of James IV. In 1505 the constitution of the college was framed; it was to consist of 36 ordinary members, raised in 1511 to 42. All the superior members who were ecclesiastics, with the exception of the doctor of medicine, were to live within the college. They chose the principal, civilist, mediciner, and other officers. All in the college, *tam majores quam minores* were forbidden to have arms, or swords, or *public* concubines in the university, to be *noctivagi*, *lenones aut scurræ vagabundi.* The chancellor and rector are elected by the senatus academicus; consisting of the principal, professor of divinity, civilist, mediciner, humanist, sub-principal, three regents, and professor of oriental languages. The senatus manages the revenues, and possesses all the patronage. 1824, debt 8465*l*. The superiority fund now amounts to 5337*l*. The ordinary income is 2469*l*. There are 134 bursaries. The professor of medicine had a salary of 201*l*., and 10*l*. for every degree. No medical students have been procured since 1726. The professor of humanity teaches chemistry; in which he had 49 students. Income 346*l*.

Marischal College was founded by the Earl Marischal in 1593. The principal has 324*l*. a year; the professor of medicine 46*l*. 12*s*.; of chemistry 73*l*. The chancellor, rector, and dean, are chosen by the managing body of *professors*—the senatus academicus.

The professorship of medicine was founded in 1700; no lectures were delivered till 1823. In 1824-5 the number of students was 16. Latterly there have been classes of anatomy and physiology, surgery, materia medica, and midwifery, established under the joint patronage of the *two* colleges. Students, 1824-7 varied in the different classes from 18 to 68. Medical graduates fee, 26*l*. The average annual number of medical graduates at *King's College* in 1781-90 was 3·1; 1791-1800, 10·4; 1801-10, 11·4; 1811-20, 9·9; 1821-6, 9·1. At Marischal College, in the same periods, the numbers were 8·8, 6·5, 6·6, 13·6; in 1821-30, 7·3.

ST. ANDREWS.

The university was founded in 1411, by Wardlaw, bishop of the diocese; it was entitled by a papal bull, to grant degrees in 1413. St. Salvador's, St. Leonard's, and St. Mary's college were established subsequently. The regular income of the university was 297*l*.; of the united colleges, (St. Leonard's and St. Salvator,) in 1823, 3021*l*. The professor of medicine had a salary of 199*l*. a year. Income of St. Mary's college, (seven years, ending 1826,) 1076*l*. The bishop of the diocese was chancellor ex officio; this officer is now named by the professors constituting the senatus academicus. All the masters and students originally elected the rector; they do so now, but their choice is restricted to one of the principals and two of the professors.

No lectures have been delivered on any branch of medicine to regular medical students during the last fifty years, except by the present incumbent. The professor of medicine attended the students when sick. No medical students matriculated till 1811; then it was enacted that the Chandos professor should be a *teaching* professor, and give instruction in medicine, anatomy, and chemistry. Chemistry has consequently been taught, and (1811-25) eighteen students attended on an average yearly. The fee paid for the degree of M. D. was 25*l*. 17*s*.; it was obtained by 1052 persons during the fifty years, 1781-1830. Personal attendance was not required; no examination was instituted; in fact nothing but the fees were indispensable. The average annual number who received the degree was 1781-90, 23·1; 1791-1800, 20·1; 1801-10, 23·3; 1811-20, 25·8; 1821-30, 12·9. The new regulations made in 1826 are strict; only six degrees have been granted in five years, 1826-30.

If the Scotch universities conferred 108·2 degrees annually on graduates that may be assumed to be twenty-two years of age—they would, when the expectation of life among healthy men is unquestionably forty years, maintain a body of 4328 graduates during the latter end of the last and the beginning of the present century. 3131 degrees were obtained after examination at Edinburgh and Glasgow; 1863, were obtained from Aberdeen and St. Andrew's without, or with a merely nominal examination. Nearly half—forty-three per cent. of the degrees and titles of M. D.—obtained in the period were spurious; sixty-eight annual graduations at Edinburgh and Glasgow would keep up—on the supposition that the mean age of graduation was twenty-two—a body of 2720 doctors in medicine. The St. Andrews and Aberdeen M.Ds. took out their degree later than the others, perhaps at the mean age of 26, when the expectation of life is 37 years; which multiplied by 40·2, the average annual number of graduations, gives 1487 as the mean number living. Every third graduate you met obtained his honours and titles from St. Andrews or Aberdeen. No one scarcely was aware of the extent to which this was carried.

How would this country have been adequately supplied with educated physicians if the Scotch Universities had been closed? It is difficult to answer this question; it is evident that the English people were indebted to Scotland for a higher degree of medical skill than could have been obtained at home. This was an advantage. At the same time two of the four Scotch Universities were making merchandise of degrees, and circulating counterfeits that passed current, and became so common that every third that came to hand was a coin stamped but never tested. If there had been no distinctive titles, and the country had been left to discover every individual's qualification, this could have led to little evil; but where a degree and the title of M.D. were employed to designate an ascertained amount of acquirement, it was forgery to stamp every applicant, palm ignorant physicians on the community, and place men above others in rank superior to them in talent. The singular circumstance that 43 in 100 physicians never underwent any examination, or appeared before a competent tribunal, and that this was tolerated down to 1826, can only be accounted for by the fact that there was no competent, open tribunal where men of experience could obtain the degree of M.D.; for the professors of the University of Edinburgh had, in 1777, determined to grant no degree in medicine to any man who had not studied in a University, resided in that institution, attended their lectures, and paid them fees. Men settled down in practice, however much experience they may have acquired, and however highly qualified, could not comply with the conditions laid down in the Edinburgh curriculum; they could have acquired a deep and comprehensive knowledge of their profession by reading and personal research, but could not spend winters on the benches of the colleges. It was these men St. Andrew's and Aberdeen pretended to honour. Wherever titles are conferred, they must be made accessible to every one whose merit and standing entitle him to distinction; but to allow an incompetent, irresponsible, corruptible tribunal to confer degrees is to deprive the documents of all value; and it is a notorious fact, that the degree of these Universities has atterly been considered as utterly valueless, as the degree of M.D. granted at the English universities, when medical science was not taught, and where the medical examinations were nominal. The degrees of Aberdeen and Cambridge, of Oxford and St. Andrew's, did not guarantee the possession of the minimum qualification required in practice; but it is pleasing to reflect, that some of the most distinguished men of the present day received their early education in these Universities: a proof, that if the majority owe that they are, and all that they are to titles, there are some that make titles illustrious.

UNIVERSITY OF LONDON.

THE Report, of which we subjoin an abstract, does not contain the final arrangements of the University on the subject of degrees. The plan is comprehensive, and perhaps superior to any thing of the kind which has yet been promulgated. The fees are, however, too high; the student has many ways of sinking the capital which he can devote to education. The committee has been too solicitous about *the mode* in which the candidate's knowledge is acquired, and too negligent in inventing tests by which its amount can be accurately determined. It can matter very little to the public whether an M.B. has attended 60 or 600 lectures; while the actual amount of acquirement, practical and theoretical, is of vital importance. In the improvement of the plan, we hope that these two points will not be overlooked.

Candidates for Degrees in Medicine shall be required to have taken a Degree in Arts.

Examination in Arts.—Every candidate must have completed his seventeenth year; fee 5*l*. Candidates for this examination shall be examined in the following subjects:

Classics.—The Greek and Latin languages—the Grammatical Structure of the English Language—the French Language or the German Language—History and Geography.

The papers in classics shall consist of passages to be translated, accompanied by questions in Grammar, History, and Geography. Proficiency in English Composition will be judged of by the style of the answers generally.

Mathematics.—Arithmetic and Algebra—Geometry.

Natural Philosophy.—Mechanics—Hydrostatics, Hydraulics, and Pneumatics—Acoustics—Heat—Electricity and Magnetism—Optics—Astronomy.

Logic and Moral Philosophy.—Elements of Logic—Elements of Moral Philosophy.

No candidate shall be approved by the examiners unless he show a competent knowledge in all the subjects of examination. Candidates who have matriculated in arts will be exempted from examination in Greek and Latin, in History, Geography, and Mathematics, and shall pay a fee of only 3*l*.

Degree of Bachelor of Medicine.—Candidates for this degree shall be required to produce certificates showing that, subsequently to having taken the degree of Bachelor of Arts, or to having passed the examination in Arts for medical students, they have been engaged during four years in the study of Medicine, and have attended courses of instruction on the following subjects, and of the extent here specified, at one or more medical institutions or schools recognised by this University.

Botany, minimum number of lectures, 40; Materia Medica and Pharmacy, 80; Chemistry, 80; Descriptive Anatomy, 100; Comparative Anatomy, 40; Physiology and General Anatomy, 100; General Pathology and Pathological Anatomy, 60; General Therapeutics, 40; Principles and Practice of Medicine, 80; Principles and Practice of Surgery, 80; Midwifery and Diseases of Women and Infants, 50; Medical Jurisprudence, 40; Hygiene, 40; Practical Chemistry, thirty lessons; Practical Anatomy, two winter sessions; Clinical Medicine and Surgery, in an hospital, during the last three years of the medical curriculum. Practical Medicine and Surgery, in an institution in which the treatment of patients is intrusted to the senior pupils under the superintendence of the medical officers, during six months.

Of Study.—The candidate, before being admitted to the *previous examination*, to have been engaged during two years in the study of Medicine, subsequently to having passed the Examination in Arts; fee 2*l*.

Examination for the Degree of Bachelor of Medicine.—No candidate will be admitted to this Examination within two years after having passed the previous Examination; fee 15*l*.

In Anatomy, the candidate shall be required to dissect a portion of the human body, and to demonstrate from preparations; and in Chemistry, to show his power in testing, and generally in chemical manipulation.

[When the necessary arrangements can be effected, the candidate's practical knowledge in Medicine and Surgery will be tested at the bedside.]

Candidates shall be examined in the following subjects:—First Day; Descriptive Anatomy, General Anatomy and Physiology, Surgery. Second Day; Chemistry, Medical Jurisprudence, Midwifery and the Diseases of Women and Infants. Third Day; General Pathology and Therapeutics, Hygiene, Practical Medicine. Examinations for Honours to be instituted.

Degree of Doctor of Medicine.—Candidates for this degree shall be required to produce certificates, that, subsequently to having taken the degree of Bachelor of Medicine, they have attended to Practical Medicine for the space of two years in an institution recognised by this University, or have been engaged during five years in the practice of their profession.—One year of attendance in an institution for practical instruction will be considered equivalent to two years of practice. Fee 25*l*.

Candidates shall be examined in the following subjects:—

First day—Physiology, Medical Jurisprudence, Practical Medicine. Second day—General Pathology and Therapeutics, Hygiene and Medical Statistics, Mental Diseases.

Thesis.—The candidate shall be required to write and defend a Thesis.

Certificates of Proficiency.—Candidates who desire to obtain a Certificate of Proficiency in Surgery or in Midwifery shall, in lieu of the second part of the Examination, undergo an examination in the subject in which they desire a Certificate.

Medical Schools and Institutions.—Lecturers shall examine their pupils after at least every fifth lecture.

Hospitals.—Each Hospital shall accommodate at least 100 patients. A Clinical Lecture on Medicine and a Clinical Lecture on Surgery shall be given at least once a week. The Histories of the Diseases shall be recorded in a journal, to be open to the inspection of the pupils. The *post mortem* Examinations shall be made in the presence of the pupils, and the Appearances recorded in the Journal of Cases.

Students already engaged in the Study of Medicine.—Students already engaged in their Medical Studies shall be required, during the time yet requisite for the completion of their education, to conform, as far as possible, to the Course of Study enjoined by this University. Fee for the Examination in Arts, 5*l.*; for the Examination in Medicine, 20*l.*

Examination in Arts.—Latin—Celsus, the first four books; Heberden's Commentaries. Natural Philosophy—As in the Examination inArts.

Examination in Medicine.—The Examination in Medicine shall be the same as the Examination for the Degree of Bachelor of Medicine.

Practitioners desirous of obtaining Degrees in Medicine.—Degree of Bachelor of Medicine: legally qualified practitioners in Medicine or Surgery may be examined for the Degree of Bachelor of Medicine. The Candidate shall be required to produce a Certificate of moral character from two persons of respectability, fourteen days at least before the Examination. Fee for Arts, 5*l.*; for Medicine, 15*l.*

Examination in Arts.—The Examination in Arts shall be the same as that required of Students already engaged in the study of Medicine. The Examinations in Medicine differ immaterially from those previously announced.

Degree of Doctor of Medicine.—Legally qualified Practitioners in Medicine or Surgery of five years' standing may, after having taken the Degree of Bachelor of Medicine in this University, be examined for the Degree of Doctor of Medicine at the next term for that Examination. The fees to be returned after all the Examinations, if the Candidate be rejected.

Examiners.—The number of Medical Examiners shall be fifteen; to form Three Sections according to the Three Parts of the Examination for the Degree of Bachelor of Medicine. The Examiners for the previous Examination, and for the Degree of Doctor of Medicine to be agreed upon each term.

ERRATA.

Page 61, under the head "Birmingham General Hospital," for *Hodges* read *Hodgson*.
Page 133, fourth line from bottom; for *three* thousand, read *thirty* thousand.

W. Tyler, Printer, Bolt-court, Fleet-street.